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KENT COUNTY COUNCIL



ANNUAL REPORT

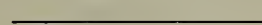
OF THE

MEDICAL OFFICER OF HEALTH

For the Year 1956

A. ELLIOTT, M.D., D.P.H.

County Medical Officer of Health



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(August 1957)

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HEALTH DEPARTMENT,

COUNTY HALL,

MAIDSTONE.

*September, 1957.***To the Chairman and Members of the Kent County Council.**

This annual report for the year 1956 includes a review of services provided under the National Assistance Act which are administered by the Health Committee and which form part of the work of the Health Department.

The vital statistics for the Administrative County show that the population has increased by 16,800 over the previous year and in all totals 1,601,000. The birth rate for the year was 14.56, a slight increase over previous years and the total number of births was 23,318, which was an increase of 463 773 over the figure for 1955. The infantile mortality rate, that is the number of deaths of infants under one year for each thousand live births, was 21.91, which is the lowest figure recorded for the County. Although there is no room for complacency in the fact that of every thousand live births some 22 infants die each year before reaching the age of one, a comparison of this figure with that of 49 in the year 1937 shows the improvements that have taken place in twenty years in the care and welfare of young children.

The maternal mortality rate, that is the number of mothers dying in childbirth expressed in relation to each thousand live and still-births, was only .25, but there is no doubt that this figure could still be reduced since there are avoidable maternal deaths. In May, 1956, the Ministry of Health issued a memorandum of advice from the Standing Maternity and Midwifery Advisory Committee reviewing the system of ante-natal care. The Ministry asked that the professional issues set out in this memorandum should be discussed by professional representatives from the three parts of the National Health Service, i.e. the hospitals, the general practitioners and local health authority staffs. Meetings were arranged by the Chairmen of Hospital Management Committees in various parts of the County of these professional representatives and extensive discussions took place during 1956 and the early part of 1957 on the relationships between the various staffs concerned with maternity services. These meetings were most valuable and it is hoped that from them there will come an even further improvement in the efficiency of the extensive maternity services now available.

The report follows the usual lines in describing each of the services provided by the Health Committee and it is only necessary for me to comment upon certain points of particular interest.

In the immunisation and vaccination services it will be seen that during the year 66.8% of the children in the 1-4 year old age group, inclusive, were immunised against diphtheria. The total number of children under fifteen who had received a course of immunisation was 52.3% and this figure is almost identical with that for 1955. A new analysis has been made of these figures which shows that some 40% of all immunisations against diphtheria are done by general practitioners under Part IV of the National Health Service Act and some 60% by the Council's staff at clinics and schools. The percentage of children under one year vaccinated against smallpox continues to rise and the figure of 63.9% is the highest that has been reached in the County. The bulk of vaccinations against smallpox are carried out before children reach the age of one year but in analysing the figures for the total number of children vaccinated under five it is found that 53.4% are done by general practitioners and the remaining 46.6% by the Council's own medical staff. An interesting feature is that the percentage of children under the age of one vaccinated against smallpox has risen steadily since 1948 when the enactment requiring compulsory vaccination was repealed. In 1949, the first complete year that saw the cessation of the compulsory requirement of vaccination, only 49.5% of children below the age of one year were vaccinated, but each succeeding year has seen a steady increase until the high figure of 63.9% was reached in 1956. This is far higher than the average for England and Wales, which is under 37%. Although there has been this continued increase in the number of infants under one year being vaccinated against smallpox, the last case in Kent of this disease was in 1946. It is now nearly three years since a case of diphtheria occurred in the Administrative County in a child under the age of fifteen years; yet the number of children immunised against the disease has shown a decline which, although small, is nevertheless serious. It is difficult to explain why there should be this marked difference as between acceptances for protective procedures against diphtheria and smallpox.

Early in the year the Ministry of Health announced that a small supply of vaccine against poliomyelitis would be made available for children born in the years 1947 to 1954, inclusive. The amount of work involved in the arrangements for vaccination was considerable in that the supply of vaccine was not available until May and vaccinating procedure had to be finished by the end of June since experience then available suggested that caution should be exercised in offering vaccination during the summer period when anterior poliomyelitis might be expected to be prevalent. As will be known, further experience has demonstrated that this cessation of vaccination is not necessary except in special circumstances and in the present year vaccinations have continued with no untoward results.

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Nevertheless, in 1956 of some 170,000 children in the age group eligible for vaccination, the parents of some 70,900 registered, the percentage being 41·7. The selection of those who could be given vaccination from the limited stock of vaccine was made on behalf of the Ministry of Health and in all some 6,776 children had the complete course of two injections by the end of the year. Because of the shortage of time that was available for the 1956 programme of vaccinations, the whole of the work was carried out by the Council's own staff, but the Ministry announced towards the end of the year that all future vaccination programmes would, according to the choice of parents, include the supply of vaccine to general medical practitioners. Arrangements for carrying out the 1957 programme were discussed and agreed with the Local Medical Committee during the year and have worked smoothly in practice. Experience has shown that where vaccination and immunisation procedures are applicable to children of school age, the help and assistance of the Heads of schools, which has been so freely given, has been invaluable and that the response from parents of children of school age has, in general, been better than the response from parents of children under school age. This has been particularly marked in the response to the offer of vaccination against poliomyelitis both in 1956 and 1957 and I am happy to place on record my appreciation of the help that has been given so freely by the Heads of schools, both County and private.

The Domestic Help Service continued to increase during the year and in particular the services provided for old people, both in the way of domestic help and evening and night attendances, increased.

The Family Help Service, in its second full year of operation, looked after 1,248 children in 367 families and the cost is just under half of what it would have been had the County Council needed to take these children into children's homes or place them in the care of foster-parents. The Family Help Service makes a major contribution to the maintenance of family life and towards the end of the year experience gained from it and its undoubted success was the starting point for the planning of a new service, the Child Help Service, designed to assist in the rehabilitation of problem families. The Child Help Service was commenced in 1957 but an outline of the proposals first put forward in 1956 may properly be included in this report.

The health and welfare services have long been concerned at the existence, within the community, of certain families who are generally described as problem families because their habits, behaviour and standards of living are much below those that are generally accepted in the society in which they live. It is said that problem families manifest the three 'Ds'—dirt, disintegration and disorder. Experience in the Health Department, both in the administration of National Health and National Assistance services, in dealing with families whose social and moral standards are low, is extensive. For many years health visitors and other social service workers have devoted a great deal of time and energy in assisting such families towards a better way of life particularly in helping and advising on the proper care of children. Much attention has of late been devoted by the Ministries of Health and Education and the Home Office to problem families and, in particular, to the co-ordination of services provided for the care and attention of the children concerned, with special emphasis on questions of neglect in their own homes.

The introduction of the Family Help Service in 1955 brought even more information about the social habits of these difficult and problem families because, for the first time, staff had free access to the homes and the family help in each case assumed responsibility for domestic management during the absence of the father and mother. Whilst it is true that not all problem families can be materially improved, the Health Committee decided that, by the placing of selected domestic helps in certain households, an attempt should be made to achieve practical measures of rehabilitation.

Three main objectives were defined as the purpose of this service:—

1. To raise the standard of living of the families.
2. To improve the welfare of the children.
3. To keep the families together and prevent their break-up.

Experience has shown that the Family Help and Domestic Help Services can do a great deal to raise the living standards in problem families, but efforts at continuous rehabilitation by these services have been nullified by the necessity for assessment procedure. It was obvious that the parents in problem families who were unwilling or unable to change their social habits of their own volition would not be ready to make payments towards rehabilitation either in their own homes or in special rehabilitation units. The Health Committee, therefore, decided that the provision of the Child Help Service should be free of cost, although in the initial stages limitation was placed upon the period of time over which full-time or substantially full-time rehabilitative help should be given. A full report on this service will be included in my next annual report but experience so far has been most satisfactory in that substantial rehabilitation has been achieved in the majority of families so far helped.

An interesting departure in administration during the year was the cessation of routine medical examination of candidates for appointment to the staff. For many years all candidates for appointment to the County staff have had an X-ray of the chest, a procedure that had proved its value long before the introduction of Mass Miniature Radiography. Since all teachers, prior to taking up their training, have had a medical examination, a procedure has been, for some twelve years past, in vogue whereby teachers taking up appointment have completed a questionnaire concerning their state of health and illnesses from which they have suffered and whether they are undergoing medical treatment at the time of appointment. These questionnaires have been scrutinised by the medical staff and, where the information suggests such a course desirable, a full medical examination has been done. Twelve years' experience showed that this procedure saved a great deal of medical staff time in that routine medical examination of each teacher joining the staff was not done; yet the design of the questionnaire was such that no significant matters in any individual's medical history were missed. As will be known, for some years past there has been a general arrangement throughout the country that all staff coming into

close and continued contact with children should be X-rayed in order to avoid the possibility of persons, unknowingly suffering from pulmonary tuberculosis, being placed in appointments that involved such contact with children. Wherever possible the Mass Miniature Radiography Service is used for the X-raying of candidates for appointment but, when this is not possible, considerable economy has been achieved by the use of the Council's own X-ray apparatus at County Hall. Experience has shown that very few candidates for appointment have, on full medical examination, been found to have physical defects that preclude the satisfactory discharge of the duties which they are to undertake and the question considered was whether the large expenditure of medical staff time on the examination of the very large numbers of staff appointed each year was justified by the results achieved. On the basis of experience with teachers joining the staff, a similar arrangement was introduced for all other candidates, except firemen, in January, 1956. From that time, in addition to the X-ray of the chest which has always been done, each candidate is asked to complete a questionnaire concerning his or her health and a study of each questionnaire determines whether a full examination shall be done or not. Experience so far shows that there has been no case where the illness of a member of the staff involving either retirement or an extensive period of sick leave could have been avoided had a full examination been carried out instead of the new procedure, but it will, of course, be appreciated that, so far as time is concerned, experience so far has been limited. Even so, the satisfactory experience that has been gained in dealing with several thousands of teachers over a period of twelve years suggests that the application of the questionnaire and X-ray system to the remainder of the staff should show no different results.

I would wish again to place on record my appreciation of the kindness and encouragement afforded to the staff of the Health Department by Members of the Council and to express my thanks to the members of the staff for their work during the year under review.

A. ELLIOTT,

County Medical Officer.

ANNUAL REPORT

Vital Statistics

POPULATION.—The Registrar-General's estimate of the population of the Administrative County at the middle of 1956 was 1,601,000: and this population is the basis of the rates quoted in this Report. Table 1 at the end of the Report shows the population in each area in the County: and from that Table it will be seen that 1,259,000 persons were resident in the urban areas, and 342,000 in the rural districts. The increase in the population of the County was 16,800, as compared with an increase of 13,800 in the previous year.

These figures give densities of population of 1·65 per acre in the county as a whole: and 6·60 per acre in the towns and 0·44 per acre in the rural districts. Compared with the previous year, there is little change in any of these figures, and the densities show the same wide range. In the towns, the extremes were 33·17 in *Penge Urban* and 0·26 in *Lydd Borough*, and in the rural districts 1·29 in *Dartford Rural* and 0·15 in *Romney Marsh Rural*.

The following tabulation shows the populations, together with the percentages in urban and rural districts in Kent, for the census years 1921, 1931 and 1951, and the Registrar-General's estimates for 1941 and 1956.

	Population									
	1921		1931		1941		1951		1956	
	No.	%	No.	%	No.	%	No.	%	No.	%
Urban Districts	795,035	71·11	847,090	71·50	882,900	75·56	1,225,800	79·12	1,259,000	78·64
Rural Districts	323,094	28·89	337,720	28·50	285,500	24·44	323,560	20·88	342,000	21·36
County ..	1,118,129	100	1,184,810	100	1,168,400	100	1,549,360	100	1,601,000	100

BIRTHS.—The births of living children, registered during 1956, totalled 23,318, an increase of 773 on the total for the previous year. Male births numbered 11,978, female births 11,340.

The crude* birth-rates for the year were 14·48 (comparable rate† 14·91) in the urban districts, 14·87 (comparable rate 15·61) in the rural districts, and 14·56 (comparable rate 15·00) in the County as a whole. The figure for England and Wales was 15·6 (Provisional).

The following tabulation shows the live-birth, still-birth, and death-rates, divided into urban and rural districts, and for the whole County divided into legitimate and illegitimate. The rates for England and Wales are added for comparison.

In all cases in this report the two years, 1938, the last normal year before the war, and 1955, have been taken for comparative purposes.

	No. of Live Births per 1,000 Home Population			No. of Still-Births per 1,000 Total (Live and Still) Births			No. of Deaths under 1 year of age per 1,000 Live Births		
	1938	1955	1956	1938	1955	1956	1938	1955	1956
Urban District	15·1	14·22	14·48	33·6	18·21	19·78	42·3	22·32	21·55
Rural District	14·4	14·28	14·87	36·5	20·19	19·29	45·0	24·35	23·21
Whole County	14·9	14·23	14·56	34·2	18·63	19·68	42·8	22·75	21·91
Legitimate	14·3	13·59	13·91	33·8	18·59	19·59	42·0	22·38	21·24
Illegitimate	0·6	0·64	0·66	42·5	19·44	21·44	61·8	30·72	36·19
England and Wales ..	15·1	15·00	15·60	38·3	23·20	23·00	52·8	24·90	23·80

The number of births, and the birth rates, in each sanitary district of the County, are set out in Table 2 at the end of this report.

The excess of births over deaths was 4,540—2,443 males and 2,097 females: and the varying margin of this excess of births over deaths for the years 1938, 1955 and 1956 is shown below:—

	<i>Male</i>	<i>Female</i>	<i>Total</i>
1938 ..	3,146	2,645	5,791
1955 ..	2,555	1,964	4,519
1956 ..	2,443	2,097	4,540

The sex-ratio of the births, on the figures shown above, represents a proportion of slightly more than 106 males to 100 females.

* Crude birth- and death-rates are the number of births or deaths per 1,000 of the population.

† For explanation see page 36.

STILL-BIRTHS.—The number of still-births recorded during the year was 468. This number represents a proportion of 19·68 per thousand of all births in the County, as against 18·63 in the previous year.

The rate of still-births (per thousand of the population) was 0·29 in urban and 0·29 in rural districts, and 0·29 in the County as a whole. This proportion may be compared with the rate for England and Wales (0·37).

The number of still-births in each sanitary district of the County is shown in Table 2 at the end of this report.

INFANTILE MORTALITY.—There were 511 deaths of infants under one year of age in Kent during the year, which represents an infantile mortality rate (number of deaths among children under one year of age per thousand live births) of 21·91, as compared with 22·8 in the preceding year.

These deaths of infants formed 2·72 per cent. of the total deaths at all ages (2·85 per cent. in 1955).

The rates in the different sanitary districts will be found in Table 2 at the end of this report; and Table 7 shows the causes of death in children under one year of age, for the years 1938, 1955 and 1956.

DEATHS.—The number of deaths registered in the County (i.e. the number of deaths of persons resident in Kent) during 1956 was 18,778—an increase of 752 on the total for the previous year. Male deaths totalled 9,535, female deaths 9,243.

Crude death-rates were 11·41 for the urban areas, 12·87 for the rural districts, and 11·72 for the whole County.

The following tabulation shows the crude death-rates recorded in Kent during 1938, 1955 and 1956. The rates for England and Wales are added for comparative purposes.

	1938	1955	1956
Urban Districts	10·6	11·1	11·4
Rural Districts	11·4	12·4	12·8
Whole County	10·8	11·4	11·7
England and Wales.. .. .	11·6	11·7	11·7*

* Provisional.

The number of deaths in each sanitary district, and the deaths in age-groups, and by cause, are shown in Tables 5, 6 and 8 at the end of this report.

The causes of death in order of importance show little variation from year to year, and the following table shows the order of the principal causes in the three years, 1938, 1955 and 1956, the number of deaths under each heading, the death-rate, and the percentage of each group to the total number of deaths from all causes:—

Cause of death	1938			1955			1956		
	Number of deaths	No. of deaths per 1,000 population	Percentage to the total number of deaths from all causes	Number of deaths	No. of deaths per 1,000 population	Percentage to the total number of deaths from all causes	Number of deaths	No. of deaths per 1,000 population	Percentage to the total number of deaths from all causes
Heart Disease	4,144	2·99	27·86	5,973	3·77	33·14	6,316	3·95	31·81
Cancer (all sites)	2,368	1·71	15·92	3,287	2·07	18·23	3,305	2·06	17·60
Diseases of circulatory system (other than Heart Disease)	817	0·59	5·49	846	0·53	4·69	885	0·55	4·71
Bronchitis	358	0·26	2·41	863	0·54	4·79	978	0·61	5·21
Violence (all forms)	699	0·50	4·70	683	0·43	3·79	697	0·44	3·71
Pneumonia	727	0·52	4·89	716	0·45	3·97	881	0·55	4·69
Tuberculosis (all forms)	778	0·56	5·23	203	0·13	1·13	161	0·11	0·86
Nephritis	370	0·27	2·49	180	0·11	1·00	162	0·11	0·86
Ulcer (Stomach and Duodenum)	156	0·11	1·05	210	0·13	1·16	241	0·15	1·28
Diabetes	201	0·15	1·35	119	0·08	0·66	116	0·07	0·62
Gastritis, Enteritis & Diarrhoea	87	0·06	0·58	84	0·05	0·47	94	0·06	0·50
Influenza	175	0·13	1·18	79	0·05	0·44	71	0·07	0·38
TOTALS	10,880	7·85	73·14	13,243	8·36	73·47	13,907	8·69	74·06

There was a small decline in the proportion of deaths in the age groups under 1 year (0·2%), 15 to under 45 years (0·2%) and 45 to under 65 years (0·3%). Each of the age groups 1 to under 5 years and 5 to under 15 years, show an increase of 0·1 per cent and 65 years and over by 0·5 per cent. It will be noted that in the last 18 years there has been a marked decline in each of the age groups under 65 years of age, particularly in the 15 to under 45 years group (7·4 per cent) whereas, the 65 years and over group has shown an increase of 16·4 per cent.

In the following summary the deaths in age-groups are expressed as percentages of the total deaths:—

Year	Percentage of Total Deaths Age-Group						Total
	Under 1 year	1 to under 5	5 to under 15	15 to under 45	45 to under 65	65 years and over	
1938	5.9	1.7	1.7	11.4	23.9	55.4	100.0
1955	2.9	0.4	0.4	4.2	20.8	71.3	100.0
1956	2.7	0.5	0.5	4.0	20.5	71.8	100.0

NOTIFIABLE INFECTIOUS DISEASES

The number of notifications of infectious diseases in each of the sanitary districts in Kent is shown in Table 3 at the end of this report.

A summary of the notifications, incidence-rates, deaths and death-rates of the principal infectious diseases in the County is shown in Table 4 at the end of this report.

SMALLPOX.—Once again no cases occurred during the year. It is now ten years since the last case was notified.

SCARLET FEVER.—Once again the decline in the number of cases has been maintained (1956—986, 1955—1,111). It is nine years since there was a death from the disease.

DIPHTHERIA.—For the second year running, no cases of diphtheria occurred in the County.

ENTERIC FEVER.—An increase in the number of cases, 45 as against 12 in 1955.

MEASLES.—In comparison with 1955, a comparatively light year for notification, 3,228 as against 31, 192 in 1955. There was one death, a child in the age group 5 to 15 years.

WHOPING COUGH.—An increase in the number of notifications, 4,224 as against 3,672 in 1955. There were two deaths, both children under 15 years of age.

POLIOMYELITIS AND POLIOENCEPHALITIS.—Less than half the number of cases notified in 1955, 112 as against 264 in 1955. There were a few more paralytic than non-paralytic cases. Eight deaths occurred as against seventeen in 1955.

OPHTHALMIA NEONATORUM.—Sixteen cases occurred as against twelve in 1955. All the cases were notified in the urban districts.

MALIGNANT NEOPLASM.—Once again there was an increase in the number of deaths, the total being 3,305 as against 3,297 in 1955. (17.60 per cent of the recorded total of deaths from all causes.) The mortality rate of 2.06 per thousand of the population is 0.02 lower than in 1955.

The following tabulation shows the mortality from cancer recorded in Kent during the years 1938, 1955 and 1956:—

KENT			1938	1955	1956
URBAN					
No. of Deaths			1,889	2,545	2,566
Death-rate			1.72	2.04	2.04
RURAL					
No. of Deaths			479	752	739
Death-rate			1.70	2.24	2.20
TOTAL					
No. of Deaths			2,368	3,297	3,305
Death-rate			1.71	2.08	2.06

Once again deaths from cancer have shown a small increase, the increase being 8; 40 less males and 48 more females. There was an increase in the deaths in the age groups between 5 and 65 years but a decrease in the over 65 age group. Although the total number of deaths from cancer increased, the percentage of the total number of deaths from all causes decreased by 0.69 to 17.60.

There is no significance as regards areas of occurrence, as in proportion they are almost equally divided between urban and rural.

The age-sex distribution of the deaths is shown below, and for comparison there is added the years 1938 and 1954.

	All ages	Per-centage	Under 1	1 to under 5	5 to under 15	15 to under 45	45 to under 65	65 and over
1938 M.	1,095	46.2	—	2	—	56	427	610
F.	1,273	53.8	1	2	—	99	490	681
TOTAL ..	2,368	100.0	1	4	—	155	917	1,291
1955 M.	1,797	54.5	—	8	3	80	652	1,054
F.	1,500	45.5	1	1	4	74	511	909
TOTAL ..	3,297	100.0	1	9	7	154	1,163	1,963
1956 M.	1,757	53.2	1	4	5	75	657	1,015
F.	1,548	46.8	—	4	5	89	517	933
TOTAL ..	3,305	100.0	1	8	10	164	1,174	1,948

DIPHTHERIA IMMUNISATION

It is now three years since a case of diphtheria occurred in this County in a child under the age of 15 years. This situation is common to the country as a whole but associated with it is the smaller number of children being immunised although a very slight rise of 0.4 per cent occurred in the County in 1956. This situation causes concern because of the increased child population at risk. Experience has proved that most parents are not against their children receiving the protection but until an outbreak occurs in their area they do not consider it necessary.

The following table shows the notifications and deaths for Kent and England and Wales since 1948:—

Year	Deaths		Corrected Notifications	
	Kent	England and Wales	Kent	England and Wales
1948	1	156	52	3,575
1949	1	84	29	1,890
1950	3	49	16	962
1951	1	33	5	664
1952	1	32	4	376
1953	—	23	2	266
1954	—	9	1	173
1955	—	13	—	169
1956	—	8*	—	63

* Provisional.

The following table shows the number of children under the age of 15 years at 31st December, 1956, who had at any time prior to that date received a course of immunisation:—

Age on 31.12.1956 (i.e. born in year)	Under 1 1956	1 to 4 1952-1955	5 to 9 1947-1951	10 to 14 1942-1946	Under 15 Total
A. Number of children whose last course (primary or booster) was completed in the period 1952-1956	2,122	61,969	91,942	37,778	193,811
B. Number of Children whose last course (primary or booster) was completed in the period 1951 or earlier	—	—	28,497	38,197	66,694
C. Estimated mid-year child population	22,800	94,100	25,1100		368,000
Immunity Index 100 A/C	9.3	65.9	51.7		52.7
1955	6.8	66.8	50.8		52.3

Note.—The Immunity Index is the number of children immunised (primary or booster) during the last five years (total of Item A) expressed as a percentage of the total estimated mid-year child population (total of item C).

The immunity index shown on the last line of the return represents the true percentage of immunisation in the County or, in other words, children who have had a completed course of injections during the last five years. The immunity index of children under one showed a slight rise, 6·8 in 1955 to 9·3 in 1956. Although this figure is not very significant, the recommended age for immunisation being eight to nine months, it does indicate a tendency for earlier primary immunisation. The decline in immunisation has again been shown in the 1 to 4 age group, this year of ·9 per cent, but in the last two years 3·8 per cent, whereas in the 5 to 14 years group, or in other words school children, showed a further rise of 0·9 per cent. This is probably due to all arrangements being made for school children to be immunised at school, whereas children of pre-school age have to be taken by their parents either to their own doctor or to a clinic. As was stated above, the index for all children under fifteen years of age showed a rise of 0·4 per cent.

The same facilities for immunisation were available at child welfare clinics, doctors' surgeries and schools and every new doctor giving service under Part IV of the National Health Service Act was invited to participate in the scheme. Personal persuasion by doctors, midwives and health visitors was still relied upon, more than paper and poster publicity.

The following table shows the number of children who received a course of immunisation during 1956. There was an increase of 2,319 in the number of children who received a primary injection, and of 11,421 in the number of children who received a reinforcing injection.

Year of Birth	1956	1955	1954	1953	1952	1951	1950	1949	1948	1947	1946	1945	1944	1943	1942	Total
Primary	2,122	12,061	2,325	465	339	522	577	230	231	557	204	134	26	23	32	19,848
Reinforcing	—	—	—	35	779	7,721	4,088	1,173	2,176	7,411	3,428	1,763	245	167	132	29,118

The following table shows the division between immunisations carried out by general practitioners and those carried out under County Council arrangements at clinics and schools during 1956.

<i>Children aged</i>	<i>Immunisation at Clinics</i>		<i>Immunisation at Schools</i>		<i>Immunisation by G.P.'s</i>	
	Primary	Booster	Primary	Booster	Primary	Booster
Under 5 years	6,051	2,440	14	155	11,410	1,630
Over 5 years and under 15	817	5,981	1,026	12,860	515	6,191
Totals	6,868	8,421	1,040	13,015	11,925	7,821

Total number of children immunised at Clinics and Schools 29,344—59·78% of total

Total number of children immunised by General Practitioners .. 19,746—40·22% of total

It will be seen that for children under 5 years of age the majority were immunised by general practitioners, whereas the majority of school children were immunised at schools or clinics. The division between general practitioners and schools and clinics for all children under 15 years of age is 40·2% to 59·8%.

Owing to the introduction of vaccination against poliomyelitis it was necessary to suspend diphtheria immunisations in selected age groups for short periods. In one case only was it necessary to suspend all immunisations as a result of an outbreak of poliomyelitis and that was in the Capel area near Tonbridge, where they were discontinued for three weeks.

VACCINATION AGAINST SMALLPOX

During the year, 18,829 persons were vaccinated against smallpox by their own general practitioners or at child welfare clinics. Of this number 14,565 were children under one year (1955—13,821) and once again a greater percentage of them were vaccinated by general practitioners, the proportion being 7,551 to 7,014.

Only one case of generalised vaccinia was reported during the year.

The following table shows the number of persons vaccinated during the year in age groups:—

Age at date of vaccination	Under 1	1 to 4	5 to 14	15 and over	Totals
No. vaccinated (1) ..	14,565	893	457	613	16,439
No. re-vaccinated (2) ..	—	208	517	1,576	2,390
TOTALS	14,565	1,101	974	2,189	18,829
General practitioners (1) ..	7,551 (66·0%)	820 (7·2%)	906 (7·9%)	2,169 (18·9%)	11,446 (100·0%)
Clinics and others (2) and (3)	7,014 (95·0%)	282 (3·8%)	67 (0·9%)	20 (0·3%)	7,383 (100·0%)
TOTALS	14,565 (100·0%)	1,102 (100·0%)	973 (100·0%)	2,189 (100·0%)	18,829 (100·0%)

The following table shows, for purposes of comparison, the number of children under one year of age, who have been vaccinated each year since 1949:—

Birth Year	Number of Live Births	Vaccinated During Year	Number Vaccinated	Percentage of Live Births	Total No. Vaccinated	Percentage of Live Births
1949	24,546	1949 1950	7,280 4,872	29·66% 19·84%	12,152	49·5%
1950	22,909	1950 1951	7,945 5,292	34·68% 23·10%	13,237	57·78%
1951	23,002	1951 1952	8,322 5,108	36·18% 22·21%	13,430	58·39%
1952	22,707	1952 1953	8,211 5,183	36·16% 22·82%	13,394	58·98%
1953	23,078	1953 1954	8,366 5,479	36·25% 23·73%	13,845	59·98%
1954	22,879	1954 1955	8,529 5,438	37·28% 23·77%	13,967	61·05%
1955	22,545	1955 1956	8,519 5,888	37·79% 26·12%	14,407	63·90%
1956	23,318	1956	8,963	38·44%		

The most important and interesting factor arising from this table is the gradual increase in the percentage of infants being vaccinated since vaccination against smallpox ceased to be compulsory in 1948. It will be seen that the percentage in 1949 was 49·5% whereas by the end of 1956, this had risen by 14·4% to 63·9%. The reason for this position having been reached is difficult to explain, as response in other parts of the country seems to be less enthusiastic; vaccination of children under one year in England and Wales in 1955 was 36·48% of the live births during the twelve months ended June 1955. One of the reasons is probably due to almost all propaganda being carried out by personal approach by doctors, health visitors and midwives.

The following table shows the division between vaccination carried out by general practitioners and those carried out under County Council arrangements during 1956.

	Under 1 year	1 to 4 years	5 to 14 years	15 and over
Vaccinations by G.P.s	7,551	820	906	2,169
Vaccinations by A.C.M.O.s	7,014	282	—	—

Total number of children under five vaccinated by general practitioners 8,371—53·43% of total.

Total number of children under five vaccinated by Assistant County Medical Officers 7,296—46·57% of total.

It will be seen that the majority of children under one are vaccinated by general practitioners, 51·84 per cent, as against 48·16 per cent under County Council arrangements. The reason for this is probably due to the fact that, except in certain circumstances, vaccinations are not carried out at clinics held less frequently than once a week.

VACCINATION AGAINST POLIOMYELITIS

On the 20th January, 1956, the Ministry of Health issued Circular 2/56 giving information about the availability of a limited supply of vaccine during the months of May and June for children born between the 1st January, 1947 and 31st December, 1954. The number of children in this age group in Kent was approximately 170,000, and immediate steps were taken to ensure that all parents of these children had an opportunity of registering them for vaccination. This was achieved by distributing forms of consent to all appropriate schools for children of school age, to child welfare clinics, general practitioners and to the offices of all District Medical Officers of Health for children of pre-school age. Advertisements were inserted in all local papers in the County and posters were displayed at various County establishments. As a result 70,900 children were registered by the 7th April, this being 41·7% of the total eligible. A return of acceptances by sex, month and year of birth was submitted on the 14th April to the Medical Research Council, acting on behalf of the Ministry of Health.

In view of the limited supplies of vaccine becoming available, certain age groups were selected by the Ministry of Health for vaccination, and on the 4th May, 6,822 c.c.s of vaccine were received, sufficient to give first injections to children born in November in each of the years 1947 to 1954, and March in each of the years 1951 to 1954. At the end of May a further issue of 6,500 c.c.s was issued to give second injections to children who received their first injections earlier in the month and first injections in certain areas to children born in August of each year. In view of the smaller second issue of vaccine and also through illness, some children were unable to receive both injections before the 30th June, when vaccinations were suspended.

Vaccinations recommenced at the beginning of December with an issue of 1,164 c.c.s of vaccine, sufficient to complete the second injections on children who were not vaccinated prior to the suspension.

The following table shows the number of children who were vaccinated as at the 31st December, 1956:—

		1947	1948	1949	1950	1951	1952	1953	1954	Total
Male	Both Inject. ..	644	575	486	418	387	285	279	219	3,293
	One Inject. ..	20	25	24	27	13	6	11	6	132
Female	Both Inject. ..	607	586	535	381	379	274	263	202	3,227
	One Inject. ..	19	28	25	24	11	7	7	3	124
	Total ..	1,290	1,214	1,070	850	790	572	560	430	6,776

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

The various services provided under Section 28 of the National Health Service Act, 1946, have been maintained during the year.

TUBERCULOSIS

NOTIFICATIONS

During the year 1,225 (1955—1,188) persons were notified as suffering from tuberculosis. On the 31st December, 19,196 (1955—18,654) persons remained on the registers of medical officers of health. Summaries of notifications will be found on pages 16 and 17.

PROVISION OF EXTRA FOODS

3,977 recommendations were made by chest physicians, of which 3,756 were approved, the remainder not being approved as, at the time of recommendation, the patients' financial circumstances brought them outside the application of the Council's assessment regulations.

REHABILITATION

Persons suffering from inactive tuberculosis who are fit enough to undertake five hours' work a day can, on the recommendation of the chest physician, be admitted to rehabilitation units established at Preston Hall, Maidstone; Papworth Hall, Cambridge, and Enham Alamein, Andover. At the end of 1955, 25 were receiving rehabilitation; during 1956, 12 were admitted, 9 discharged and 28 remained at the end of the year.

BEDS AND BEDDING

105 patients, on the recommendation of chest physicians and general practitioners, were provided, on loan, with beds and bedding during the year.

SHELTERS

During the year 3 open-air shelters were issued, 24 being in use.

With the gradual alleviation of the acute housing shortage, the need for open-air shelters is slowly disappearing.

KENT COUNCIL OF SOCIAL SERVICE

This Council has continued to afford assistance to patients and their dependants in the form of extra milk, beds and bedding, clothing, holidays, materials for diversional therapy, finding suitable employment, fares to visit patients in sanatoria and hospitals, re-housing and removal expenses. The County Council make an annual grant for administrative expenses only.

B.C.G. VACCINATION

The carrying out of this vaccination is still confined to persons in close contact with patients suffering from tuberculosis and is given by chest physicians at the chest clinics. The number of persons who received vaccination during the year was 2,773.

MEANS OF CONTROLLING TUBERCULOSIS

The means of controlling tuberculosis are the same as given in the Annual Report for 1953, when a full description of the measures taken was included.

ASCERTAINMENT OF CONTACTS

Contacts of persons known to be suffering from tuberculosis are persuaded by the health visitors to attend the chest clinics for examination.

The following table shows the extent of contact examination during the years 1952-1956:—

Year	1952	1953	1954	1955	1956	Total
Number notified as suffering from tuberculosis ..	1,697	1,402	1,311	1,188	1,225	6,823
Number of contacts examined	4,787	4,709	3,624	7,862	12,491	33,473
Number found to be tuberculous	117	140	87	93	130	567

EMPLOYMENT OF PERSONS KNOWN TO BE SUFFERING FROM TUBERCULOSIS

Sputum positive cases are not generally encouraged to return to work but if they do, every precaution is taken to ensure that there is no spread of infection. Where the previous employment is not considered suitable, the Disablement Resettlement Officer of the Ministry of Labour, endeavours to find alternative employment or in certain cases the patient will undertake a course of training for work suitable to his condition.

ILLNESSES GENERALLY

RECUPERATIVE CARE

The following table shows the extent of recuperative care provided during the year:—

				No. of Persons Admitted	Total Weeks	Average Stay	
						Weeks	Days
Adults	Male ..	43	107.5	2	3		
	Female ..	121	321.6	2	4		
School Children	Male ..	7	25.3	3	4		
	Female ..	3	16.0	5	2		
Children under 5 years of age	Male ..	5	17.5	3	4		
	Female ..	—	—	—	—		
Mother and Baby .. .. .	.. ..	2	4.0	2	—		
TOTALS .. .. .	.. ..	181	492.5	2	5		

Recuperative residential care is provided under Sections 22 and 28 of the Act. This is restricted to instances where a person has suffered from an illness which has been treated either in a hospital or at home and whilst needing further medical and/or nursing care of the type that can be provided by a general practitioner and home nurse, cannot have that care at home.

It may be of interest to note that 290 applications for recuperative care were received of which 181 were accepted. The other 109 cases were either withdrawn before going away, or were found to be outside the scheme approved by the County Council.

NURSING REQUISITES

The British Red Cross Society and St. John Ambulance Brigade, as agents of the County Council, continued to provide from their depots nursing requisites to persons ill at home.

BEDS AND BEDDING

Sixty-seven persons were provided with beds and bedding during the year. *Paraplegics*—a hospital-type bed, lifting pole and handle, together with such special nursing equipment as may be recommended by the hospital concerned is provided for persons suffering from paraplegia.

VENEREAL DISEASE

The two female Social Workers carried out the following visits in connexion with their duties in tracing contacts and following up persons who have not maintained attendance at clinics:

Number of persons visited	..	..	..	752
Number who attended for treatment	..	..	..	574

HEALTH EDUCATION

The services of a health education lecturer, on a part-time basis, were maintained during the year. Lectures were given at 116 meetings of various organisations on different aspects of health education covering social hygiene, including venereal disease and other associated problems as well as sex education; also aspects of physical education, general physical fitness, food handling and prevention of contamination; diphtheria immunisation and vaccination, control of infectious diseases and local health services.

ORTHOPAEDIC SERVICES

The arrangements made for the treatment of children suffering from crippling defects has continued to operate satisfactorily during the year, but there has been a further reduction in the number of attendances. In 1956 there were 23,316 attendances at the non-hospital clinics compared with 25,219 attendances during 1955. Of the former figure, 92.2 per cent were children in attendance at maintained schools and 7.8 per cent children under school age.

Particulars of new cases of tuberculosis, and of deaths from the disease, in Kent during 1956:—

Age Periods	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
0—1	—	2	—	—	—	—	—	—
1—2	4	4	1	—	}	—	—	—
2—5	8	3	3	2		—	—	—
5—10	16	11	6	3	}	—	—	1
10—15	13	15	6	4		—	—	—
15—20	54	64	7	5	}	—	2	1
20—25	60	65	9	5		—	—	—
25—35	96	90	7	8	}	15	15	3
35—45	111	61	—	5		—	—	1
45—55	105	39	4	5	}	56	11	5
55—65	105	34	2	3		—	—	6
65—75	54	17	—	5	15	10	1	2
75 and upwards ..	11	7	—	5	9	7	—	1
TOTALS	637	412	45	50	95	45	10	11
	1,144				161			

CARE OF MOTHERS AND YOUNG CHILDREN

The Council's services for the care of mothers and young children provides health visiting services for the visitation of newly born babies and children up to five years of age; child welfare centres where provision is also made for ante-natal clinics and post-natal clinics, including mothercraft and relaxation classes; domestic help during the lying-in period, and during the illness of mothers of children under five years of age; family help during the temporary absence of the mother; and, by special arrangements for the care of the illegitimate child, including the management of a Mother and a Baby Home. Facilities for the dental care of mothers and young children are available through the County dental service.

CHILD WELFARE CENTRES

At the end of the year there were 279 child welfare centres and 64 ante-natal and post-natal clinics in the County. 202 of these clinics were staffed by general practitioners and the remainder by the Council's medical officers.

The total attendances during the year at the child welfare centres were 424,026 covering 56,479 children; of these 23,491 under one year of age attended for the first time during the year. At the ante- and post-natal clinics there were 5,360 first attendances and 19,570 subsequent attendances.

Six additional centres were opened during the year; one of these was a new centre erected on the Wayfield Estate at Chatham, and the remainder were opened in premises which are not the property of the Council at Smarden, Ditton, Strood (Cedar Road), Bexley (Baldwyns Park), and St. Mary Cray (Poverest Road). Another centre at Watlington, which had been temporarily closed during the year to enable adaptations to be made to the premises, was re-opened with greatly improved accommodation. Works of adaptation are in hand at a number of other centres in the County.

Ten ante-natal clinics were closed during the year because of the decreased attendances, but four of these were replaced by mothercraft and relaxation classes at the larger centres.

MATERNAL MORTALITY

The following table gives details of the deaths in the County of women in childbirth during each of the last ten years. For comparative purposes the average figures for the five years 1952-1956 are added.

Year	No. of maternal deaths	No. of live births	No. of still-births	Maternal mortality rates	
				per 1,000 of all births	per 1,000 of live births
1947	40	30,928	730	1.3	1.3
1948	33	26,258	548	1.3	1.3
1949	29	24,546	522	1.2	1.2
1950	10	22,909	470	0.5	0.5
1951	21	23,002	497	0.9	1.0
1952	12	22,706	495	0.5	0.5
1953	22	23,078	468	0.9	1.0
1954	12	22,879	474	0.5	0.5
1955	15	22,545	428	0.7	0.7
1956	12	23,318	468	0.5	0.5
Average of five years, 1952-1956	15	22,905	467	0.7	0.6

Enquiries have been made into seven deaths occurring within the County that were due to or associated with pregnancy, childbirth or abortion and the following information was obtained:—

	<i>Deaths from Sepsis</i>	<i>Deaths from other causes</i>	<i>Total</i>
(i) Women who had arranged to be confined at home	—	2	2
(ii) „ „ „ in a private nursing home	—	—	—
(iii) to be confined in a hospital	1	4	5
(iv) Women who had made no arrangements for the confinement	—	—	—
TOTALS	1	6	7

All these women, including two admitted in an emergency, died in hospital.

SPECIAL CARE OF PREMATURE INFANTS

During the year notifications were received regarding 1,447 babies who weighed $5\frac{1}{2}$ lbs. or less at birth. Details of these premature births are given below, from which it will be seen that 1,032 of the babies were born in hospitals and 48 in nursing homes. The remaining 367 were born at home although 75 were subsequently transferred to hospital.

Notifications were also received relating to 231 premature stillbirths, and details of these are given in the following table.

Weight at Birth (1)	PREMATURE LIVE BIRTHS															PREMATURE STILL-BIRTHS		
	*Born in hospital			Born at home and nursed entirely at home			Born at home and transferred to hospital on or before 28th day			Born in nursing home and nursed entirely there			Born in nursing home and transferred to hospital on or before 28th day			Born in hospital	Born at home	Born in nursing home
	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days			
(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	
(a) 3 lb. 4 oz. or less (1,500 gms. or less)	137	68	38	7	6	1	22	9	7	5	2	1	—	—	—	83	13	2
(b) Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. (1,500-2,000 gms.)	198	19	162	24	2	21	20	2	16	8	1	7	—	—	—	44	12	—
(c) Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. (2,000-2,250 gms.)	222	4	208	38	1	36	16	1	14	8	—	8	1	—	1	34	4	1
(d) Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2,250-2,500 gms.)	475	11	456	223	4	216	17	1	11	26	—	26	—	—	—	30	7	1
TOTALS . . .	1032	102	864	292	13	274	75	13	48	47	3	42	1	—	1	191	36	4

* The group under this heading includes babies who were born in one hospital and transferred to another.

DOMESTIC HELP SERVICE

The demand for this service has continued to increase and the number of households served each week, excluding the night attendant and evening service and the family help service, rose from approximately 5,100 at the beginning of 1956 to more than 5,300 at the end of that year.

During the year domestic help was provided in 13,583 households and the reasons for such provision are:—

Maternity	2,087	(15.4%)
Tuberculosis	296	(2.1%)
*Presence of a person over 65	8,303	(61.1%)
Others, e.g., illness, mental defective, etc.	2,897	(21.3%)

* Regular short period service was maintained for this group throughout the year and they received approximately 72% of the total service given in the year.

The average number of helps engaged in the service remained at approximately 1,400 and the average total hours worked each week was equivalent to the whole time service of about 650 persons.

NIGHT ATTENDANT AND EVENING SERVICE

This service, provided under Section 28 of the National Health Service Act, 1946, and which operates within the general organisation of the domestic help service, has been described in detail in my previous reports. During the year 686 applications were received and, after investigation into the circumstances of each case, help was provided by the Council in 622 cases, 363 for night service, and 259 for evening service. The applications were received from various sources, but the majority (317) were from the patient's doctor; 81 from hospitals; and 102 from the domestic help organisation.

In 325 cases the person receiving the service was living alone, and the average age was 80 years.

FAMILY HELP SERVICE

This service also operates within the organisation of the domestic help service, and during the year 529 applications were received from the Children's Officer for temporary help to be provided as an alternative to the children being taken into care by the Children's Committee. In 132 of these cases no help was provided, either because the family had been able to make other arrangements, or the

anticipated need for help had not materialised. Help was, however, provided for 367 families necessitating in 24 cases the employment of a resident help. The average period of service among these families was 27 days, although in a number of cases it was necessary to extend service well beyond this period, the maximum being 11 months during the year under review, but service in this case continued in the following year for a further period of 51 days. This was a family of five children, the mother died in hospital and the father had considerable difficulty in making other arrangements.

The number of children in the families served totalled 1,248 and the number of days covered by the service during which these children would have needed to be in care totalled 35,068.

The circumstances calling for the provision of this service were mainly the admission of the mother to hospital for treatment (189) and for confinement or complication of pregnancy (131) or to a convalescent home (14). In 11 cases the need arose because of the death of the mother and 22 from the desertion of the mother.

HEALTH VISITING

The approved establishment of health visitors remains at 275, but the numbers employed at the end of the year were 249 whole-time and 5 part-time. The majority of the health visitors are engaged on combined duties, e.g., care of mothers and children and the school health service. The work of tuberculosis home visiting is carried out by health visitors. Health visitors also attend the chest clinics. In some areas they also act as Assistant Mental Health Officers as described in the Mental Health Section of this report on page 31.

The number of children under 5 years of age visited during the year totalled 103,726. First attendances were paid during the year to 3,025 expectant mothers and to 25,645 children under one year of age. The number of families or households visited during the year was 96,901 and the total number of visits paid by the health visitors was as follows:—

To expectant mothers	..	..	..	..	..	..	5,966
To children under 1 year	..	..	..	..	..	..	146,437
To children aged 1 and under 2 years	..	..	..	..	..	..	87,703
To children aged 2 but under 5 years	..	..	..	..	..	..	122,895
To patients with tuberculosis	..	..	..	..	..	..	45,917
Other visits (hospital after care, care of old people, etc.)	..	..	..	..	..	..	19,978
TOTAL	..	..	..	..	..	..	428,896

The services of these health visitors continue also to be used to deal with enquiries from hospitals and other sources regarding home conditions, and arrangements have also been made for the visitation of old people living in accommodation provided by a large District Council. Visits to old people in their homes, usually at the request of their doctor, is being extended throughout the County.

The Council's scheme for the training of health visitors was continued and during the year 15 students commenced training, 11 students satisfactorily completed the training course and entered the employment of the Council.

The post-certificate courses were also continued, 33 health visitors attending the approved residential courses, and the majority of the health visiting staff attending one or more of the week's course of lectures arranged at the County Hall.

NOTIFICATION OF BIRTHS

The number of births notified during the year was 23,631 and details of these notifications are as follows:—

				<i>Domiciliary</i>	<i>Institutional</i>	<i>Totals</i>
Live births	..	..	..	8,220	14,938	23,158
Still births	..	..	..	106	367	473
TOTALS	..	..	..	8,326	15,305 (65%)	23,631

CARE OF THE ILLEGITIMATE CHILD

The accommodation required by the Council for the institutional care of unmarried mothers and their babies is provided by voluntary organisations, usually at homes administered by the Canterbury and Rochester Diocesan Councils for Moral Welfare and by the Council itself. During the year there were 138 admissions at the request of the Council to voluntary homes.

The Mother and Baby Home administered by the Council has 22 beds and 14 cots. There were 117 admissions during the year and these included a number of mothers who would not normally be accommodated in the Diocesan Homes, including a number who were mentally backward and some who had had previous pregnancies. Special arrangements need to be made for the future care of some of these women and their babies, and there is close liaison between officers of the Council and the workers for the voluntary organisations.

NURSERIES AND CHILD MINDERS (REGULATION) ACT

At the end of the year ten premises were registered as nurseries under the Act, with a total accommodation for 235 children. There were also 75 registrations for child minders, covering a total provision for 600 children. Regular inspections of the premises concerned were carried out by health visitors.

NURSING HOMES

The duties under the Public Health Act of 1936 which provides for the registration and visitation of nursing homes, have been delegated to 32 of the 57 County districts. Twenty-four nursing homes are at present registered with the County Council, with accommodation provided for 287 beds, of which 20 are for maternity patients.

DENTAL TREATMENT

The provision made for the dental care of mothers and young children continued on the same lines as in the previous year, but the shortage of dental surgeons delayed the offering of immediate appointments to patients for treatment. The aggregate time devoted to them during the year was 864 half-day sessions and was equivalent to 1.6 whole-time officers. Throughout the year, inspection and treatment was available in 51 permanent clinics and in three mobile clinics visiting rural districts.

During the year 85 more mothers and 79 fewer children attended the clinics for examination than in the previous year, but a smaller number accepted treatment, which accounts for the reduction in new patients' attendances and in the amount of work done, compared with the year 1955. Of 1,107 expectant and nursing mothers and of 2,005 children under school age referred from ante-natal and infant welfare centres for inspection, 911 and 1,526 took advantage of the facilities provided for treatment, and 572 and 1,242 completed it.

Details of the work carried out during the year for mothers and young children with comparable figures for 1955 are given in the table below:—

(a) *Expectant and Nursing Mothers*

	1955	1956
Number treated	922	911
Number made dentally fit	834	572
Number of attendances	4,140	3,848
Number of extractions	2,708	2,451
Number of scalings and gum treatments ..	539	479
Number of teeth filled	1,079	844
Number of fillings inserted	1,106	879
Number of other operations	1,826	1,243
Number of dentures supplied	457	461
Number of dentures repaired	58	53

(b) *Children under School Age*

	1955	1956
Number treated	1,668	1,526
Number made dentally fit	1,534	1,242
Number of attendances	4,126	3,091
Number of extractions	1,956	1,675
Number of silver nitrate treatments ..	340	555
Number of teeth filled	1,819	1,387
Number of fillings inserted	1,886	1,439

The oral hygienist working under the direction of the dental officer at Chatham, Gravesend, Orpington, Sidcup, Welling and St. Paul's Cray, carried out 167 scalings and polishing of teeth in 48 half-day sessions, in addition to those shown in the table above.

WORKSHOPS

The manufacture of mechanical appliances for school children by the six technicians in the workshops of the Council in Dover and Maidstone was limited in July by the resignation of one technician at Maidstone and alterations to the premises. The new workshops to accommodate eighteen technicians in Maidstone was brought into use on 11th December. Following the appointment of three more technicians to commence duty within the first three months of 1957, the manufacture of denture appliances for expectant and nursing mothers undertaken by two firms of contractors, will be transferred to the workshop in Maidstone on the 1st April, 1957. Below in Tables "A" and "B" is a summary of the work carried out during 1956, and Table "C" shows the work carried out in the County Workshops and by contractors.

TABLE "A"

	Referred for Examination	Requiring Treatment	Treatment provided (including cases brought forward from previous year)	Patients made dentally fit
Expectant and Nursing Mothers	1,107	937	911	572
Children under five	2,005	1,986	1,526	1,242

TABLE "B"

	Extrac- tions	Anaesthetics		Fillings	Scalings or scaling and gum treat- ment	Silver Nitrate Treat- ment	Dress- ings	Dentures Provided	
		Local	General					Com- plete	Partial
Expectant and Nursing Mothers.. ..	2,451	626	1,233	844	479	—	287	231	230
Children under five ..	1,675			1,387	—	555	709	—	—

TABLE "C"

WORK CARRIED OUT IN COUNTY DENTAL WORKSHOPS—
MOTHERS AND YOUNG CHILDREN

Dentures	Remakes	Repairs
11	—	—

SCHOOL CHILDREN

Dentures	Remakes	Repairs	Orthodontic Appliances	Remakes	Repairs	Oral Screens
342	7	77	1,324	11	181	200

WORK CARRIED OUT BY CONTRACTORS

Dentures	Remakes	Repairs
450	14	53

MIDWIFERY AND HOME NURSING SERVICES

The staff at the end of the year was 6 administrative midwifery and nursing officers, 120 whole-time midwives, 174 whole-time home nurses, 130 whole-time nurse-midwives and 21 part-time nurses and midwives. In addition, the Margate District Nursing Association, acting as agents of the Council, employed 5 permanent whole-time nurses and 1 temporary relief nurse. By arrangement with the East Sussex County Council a small amount of midwifery and home nursing is undertaken in an adjoining part of Kent by one of the East Sussex District Nursing Associations.

MIDWIFERY SERVICE

The number of midwives practising in the County at 31st December, 1956, and the number of deliveries attended by midwives during the year are:—

						<i>Number of Midwives practising at 31.12.56</i>	<i>Number of Patients delivered by Midwives during the year</i>
<i>Domiciliary Midwives</i>							
Midwives and nurse-midwives employed by the Council	..	..	..	..	..	252	8,145
Nurse-midwives employed by voluntary bodies	..	..	..	..	..	1	—
Midwives in private practice	..	..	..	..	..	26	117
TOTALS	..	..	..	..	..	279	8,262

Institutional Midwives

Employed by Hospital Management Committee	..	..	246	11,989
Employed by Voluntary Institutions	..	..	2	50
In private nursing homes	..	..	22	309
In Military families hospitals	..	..	9	234
TOTALS	..	..	279	12,582
Totals for all midwives	..	..	558	20,844

The number of occasions Medical Aid was sought by Midwives during 1956 is shown below:—

	<i>By Domiciliary Midwives</i>	<i>By Institutional Midwives</i>	<i>Total</i>
For the Mother	1,438	18	1,456
For the Child	284	5	289
TOTALS	1,722	23	1,745

Notifications of the following occurrences during the year were:—

	<i>By Domiciliary Midwives</i>	<i>By Institutional Midwives</i>	<i>Total</i>
Still-birth	72	39	111
Death of mother	—	1	1
Death of infant	16	10	26
Laying out a dead body	24	—	24
Liability to be a source of infection	23	2	25
Adoption of artificial feeding	514	1,645	2,159
TOTALS	649	1,697	2,346

During the year the Council's midwifery staff visited 6,569 patients who had been confined in hospital and discharged home before the fourteenth day of the lying-in period.

DOMICILIARY AND INSTITUTIONAL CONFINEMENTS

In 1951, the Minister of Health made certain recommendations as to the policy which should be adopted in the selection of maternity cases for admission to hospital, having regard to the continued demand for hospital beds for persons suffering from chronic forms of sickness. He suggested that, in general, it would seem appropriate for about half the total number of confinements to take place in hospital and about half at home.

The figures given below show the proportion of institutional and domiciliary births in the County classified according to areas:—

ANALYSIS OF BIRTHS IN THE ADMINISTRATIVE COUNTY OF KENT
CLASSIFIED AS TO DOMICILIARY, NURSING HOME AND HOSPITAL

<i>Area showing Main Towns</i>		<i>Population*</i>	<i>Place of Confinement</i>				<i>Percentage</i>		
			<i>D.</i>	<i>N.H.</i>	<i>H.</i>	<i>Total</i>	<i>D.</i>	<i>N.H.</i>	<i>H.</i>
No. 1. Ashford, Deal, Dover, Folkestone.									
1950	Whole Year	198,634	1,386	332	1,425	3,143	= 44.10	10.56	45.34
1952	„ „	197,466	1,341	277	1,348	2,966	= 45.21	9.34	45.45
1954	„ „	200,700	1,373	216	1,337	2,926	= 46.91	7.31	45.78
1956	„ „	206,320	1,339	207	1,476	3,022	= 44.31	6.85	48.84
No. 2. Thanet Towns, Herne Bay, Whitstable, Sandwich.									
1950	Whole Year	174,000	1,173	179	726	2,078	= 56.45	8.61	34.94
1952	„ „	176,449	1,047	125	935	2,107	= 49.69	5.93	44.38
1954	„ „	176,880	1,081	156	940	2,177	= 49.65	7.16	43.19
1956	„ „	178,640	964	211	1,261	2,436	= 39.57	8.66	51.77
No. 3. Maidstone.									
1950	Whole Year	137,750	1,060	171	880	2,111	= 50.21	8.10	41.69
1952	„ „	139,430	1,028	106	1,039	2,173	= 47.31	4.88	47.81
1954	„ „	141,850	1,044	109	1,010	2,163	= 48.26	5.03	46.71
1956	„ „	143,650	1,035	98	1,047	2,180	= 47.47	4.49	48.03

Area showing Main Towns	Population*	Place of Confinement				Percentage				
		D.	N.H.	H.	Total	D.	N.H.	H.		
No. 4. Tunbridge Wells, Sevenoaks.										
1950	Whole Year	137,829	612	129	1,170	1,911	=	32.03	6.75	61.22
1952	" "	138,453	517	69	1,273	1,859	=	27.81	3.71	68.48
1954	" "	140,460	585	73	1,266	1,924	=	30.41	3.79	65.80
1956	" "	142,710	554	100	1,279	1,933	=	28.66	5.17	66.17
No. 5. Medway Towns, Faversham, Sittingbourne, Sheerness, Gravesend, Northfleet.										
1950	Whole Year	339,157	2,785	835	1,671	5,291	=	52.64	15.78	31.58
1952	" "	350,332	2,629	408	2,364	5,401	=	48.68	7.55	43.77
1954	" "	350,970	2,533	433	2,485	5,451	=	46.47	7.94	45.59
1956	" "	356,360	2,535	368	2,746	5,649	=	44.88	6.51	48.61
No. 6. Bexley, Crayford, Dartford, Erith.										
1950	Whole Year	241,320	814	26	2,467	3,307	=	24.61	.79	74.60
1952	" "	240,260	685	11	2,421	3,117	=	21.98	.35	77.67
1954	" "	241,800	660	3	2,451	3,114	=	21.19	.10	78.71
1956	" "	240,260 249,630	777	18	2,920	3,715	=	20.92	.48	78.60
No. 7. Beckenham, Bromley, Chislehurst, Orpington, Penge.										
1950	Whole Year	308,080	1,131	134	2,965	4,230	=	26.74	3.17	70.09
1952	" "	314,010	1,011	10	3,215	4,236	=	23.86	.24	75.90
1954	" "	317,740	1,069	16	3,214	4,299	=	24.86	.38	74.76
1956	" "	253,280 323,690	1,140	37	3,519	4,696	=	24.28	.79	74.93
TOTALS:										
1950	Whole Year	1,536,770	8,961	1,806	11,304	22,071	=	40.6	8.2	51.2
1952	" "	1,556,400	8,257	1,006	12,595	21,859	=	37.78	4.60	57.62
1954	" "	1,570,400	8,345	1,006	12,703	22,054	=	37.83	4.58	57.59
1956	" "	1,601,000	8,345	1,039	14,248	23,632	=	35.31	4.40	60.29

*Registrar-General's Estimates of Population at 30th June, each year.

(D. = Domiciliary. N.H. = Nursing Home. H. = Hospital.)

INHALATIONAL ANALGESICS

Relief of pain at child-birth can be provided by midwives administering to their patients either a mixture of nitrous oxide and air or a mixture of trichloroethylene and air. The former of these two methods has been in use by County midwives in Kent since 1945; the latter method has only recently been approved by the Central Midwives' Board as a safe means of procuring analgesia at child-birth by practising midwives. During 1955 a commencement, on a small scale, was made in the use of trichloroethylene by the Council's midwives who, in 1956, administered it to 75 patients.

The following figures show how, over the last ten years, the use of inhalational analgesics by domiciliary midwives has increased in Kent.

Year	Approximate percentage of Domiciliary Confinements at which analgesia was administered				
1947	13.4				
1948	30.7				
1949	52.0				
1950	63.8				
1951	66.4				
1952	72.0				
1953	76.9				
1954	79.1				
1955	83.0				
1956	83.8				

Note.—These figures take no account of cases in the Boroughs of Bromley and Gillingham up to 31st December, 1947.

USE OF PETHIDINE BY MIDWIVES

Midwives are permitted to use Pethidine which assists in the relief of pain at childbirth. During the year 1956 domiciliary midwives used this drug in approximately 46·3 per cent of the deliveries attended by them.

DISTRICT TRAINING OF PUPIL-MIDWIVES

A part of each pupil-midwife's training is received from a domiciliary midwife with whom she works for a period of three months attending patients in their homes. The scheme was operated during the year by 28 midwives employed by the Council and approved by the Central Midwives Board to provide this district training in conjunction with the following hospitals:—

Pembury Hospital, near Tunbridge Wells
 All Saints' Hospital, Chatham
 West Hill Hospital, Dartford
 Bexley Maternity Hospital, Bexleyheath
 Kent and Canterbury Hospital, Canterbury

During the year 109 pupil-midwives completed their domiciliary training with County midwives.

COURSES OF INSTRUCTION FOR MIDWIVES

Statutory effect was given during 1955 to the revised Sec. G. of the Rules of the Central Midwives Board, requiring the attendance of practising midwives, each five years, at courses in midwifery approved by the Board.

As a commencement during 1956 towards securing the post-certificate training of all those County Midwives who would need to have undergone a refresher course by 1st January 1958, twenty-four of the midwives concerned attended residential courses organised by the Royal College of Midwives and approved by the Central Midwives Board.

The Council's own annual non-residential post-certificate course for midwives, the twenty-sixth course of its kind, was held in Maidstone in September at which County midwives and midwives in independent practice made in all 1,553 attendances.

HOME NURSING SERVICE

At the 31st December, 1956, the number of home nurses engaged in the home nursing service, including nurse-midwives, was composed as follows:—

Employed by the Council	324
Employed by Voluntary Associations ..	6
TOTAL	330 (including 21 employed part-time only)

The following table shows that while the number of patients seen each year may vary, there is a continuing upward trend in the number of attendances made by the nurses, although at the end of 1956 the rise is seen to have become far less steep.

	Patients attended during:—				Nursing attendances made during:—			
	1953	1954	1955	1956	1953	1954	1955	1956
K.C.C. ..	31,963	29,764	30,055	29,011	708,584	745,498	798,185	809,967
Voluntary ..	1,275	1,316	1,257	973	23,963	28,304	25,334	20,419
TOTAL ..	33,238	31,080	31,312	29,984	732,547	773,802	823,519	830,386

The yearly increase in the number of attendances is probably due in large measure to the increasing proportion of elderly patients now being attended who come within the category of chronic cases remaining under the care of the nurses for long periods.

In the following table, showing the number of patients attended and the number of attendances received, classified under the different types of patients dealt with by the nurses during the year, the total of 29,984 patients included 54·6 per cent. who were 65 or over. The attendances made to these elderly patients accounted for 63·4 per cent. of the total made to patients of all ages. The table also shows that of the patients of all ages who were attended in 1956, less than 3 per cent. were infants of five years of age or less.

	Medical	Surgical	Infectious Diseases	Tuberculosis	Maternal Complications	Others	Totals	Patients included in (2)-(7) who were 65 or over at the time of the first visit during the year (9)	Children included in (2)-(7) who were under 5 at the time of the first visit during the year (10)	Patients included in (2)-(7) who had more than 24 visits during the year (11)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
No. of patients attended by Home Nurses employed by										
(a) K.C.C. ..	25,453	2,419	6	856	261	16	29,011	16,060	727	7,202
(b) Voluntary Associations	834	125	—	14	—	—	973	332	6	91
No. of Nursing Attendances made by Home Nurses employed by								Attendances upon the above mentioned patients	Attendances upon the above mentioned patients	Attendances upon the above mentioned patients
(a) K.C.C. ..	696,438	73,196	46	38,122	2,108	57	809,967	520,226	5,579	570,756
(b) Voluntary Associations	16,965	2,562	—	892	—	—	20,419	6,063	29	6,098

With the increasing use today of antibiotics in the treatment of all forms of infection, many patients are visited solely to receive injections. The giving of an injection takes little of a nurse's time in contrast to the more lengthy procedures formerly employed; this fact, to some extent, contributes to the increase that has taken place in the number of nursing attendances made without a correspondingly marked increase in the total number of nursing staff.

It is estimated that during 1956 approximately 327,270 nursing attendances were made to approximately 10,760 patients solely to provide injections of various kinds.

BLIND PERSONS

The number of registered blind persons in the County at the 31st December, 1956, was 3,238, and the age-sex grouping is:—

Age group	Male	Female	Total	Approx. number of registered blind persons per 10,000 population in respective age groups
Under 1	—	—	—	1.99
1	—	2	2	
2	1	1	2	
3	2	—	2	
4	5	3	8	
5—10	19	18	37	26.06
11—15	16	10	26	
16—20	11	10	21	
21—30	42	28	70	
31—39	69	58	127	
40—49	94	75	169	
50—59	151	153	304	
60—64	98	134	232	
65—69	135	185	320	
70 and over	636	1,281	1,917	
Unknown	—	1	1	
TOTAL	1,279	1,959	3,238	

The following table shows the action taken concerning the examination of persons alleged to be blind, during 1956—

	Number of examinations	Certified blind		Not certified blind	
		Male	Female	Male	Female
NEW CASES	568	146	271	54	97
RE-EXAMINATIONS:—					
Previously blind—still blind	8	1	7	—	—
Previously blind—now not blind	13	—	—	2	11
Previously not blind—still not blind ..	34	—	—	13	21
Previously not blind—now blind	38	10	28	—	—

ST. DUNSTANERS

The number of St. Dunstaners registered in this County is 86, of whom 53 are in employment, 32 are unemployable and 1 is unemployed.

REGISTER OF BLIND PERSONS

The central register of the blind is kept by the County Medical Officer, and arrangements have been made to keep the Kent County Association for the Blind informed of action taken concerning blind persons.

The Blind Welfare Services provided are:—

HOME TEACHERS

There are 15 home teachers who regularly visit the registered blind persons, and keep in touch with those who are classed as partially sighted. Their duties include reporting on new cases with a view to registration, and teaching Braille, Moon and pastime handicrafts in suitable cases. This pastime work is taught either in the homes of the blind persons, or at special classes when the number attending justifies such arrangement. The home teachers have formed and in some cases attend social clubs, where an opportunity is provided for refreshment, education and games. Their duties are arranged to enable them to undertake certain enquiries and services for the Kent County Association for the Blind.

During the past year the home teachers made 17,885 visits, gave 851 lessons in Braille or Moon and 4,830 lessons in pastime handicrafts.

WORKSHOP EMPLOYMENT

There were 13 men and 4 women employed in workshops administered by the following Organisations:—

London Association for the Blind.
Blind Employment Factory.
Royal School for the Blind.
Royal London Society for the Blind.
General Welfare of the Blind.
West Ham Municipal Workshops for the Blind.

These workshop employees were occupied as follows:—

					Male	Female
Injection moulder	..	..	..	..	1	—
Basket makers	..	..	..	..	5	—
Brush makers	..	..	..	..	*4	—
Mat maker	..	..	..	..	1	—
Machine knitters	..	..	..	..	—	4
Boot repairer	..	..	..	..	1	—
Telephonist	..	..	..	..	1	—
					—	—
TOTAL	..	..	..	..	13	4
					—	—

* Includes one partially sighted person.

The rates of pay in the workshops are agreed rates fixed through the appropriate negotiating procedure. The workers' actual earnings are augmented by a sum of 15s. a week, and additional supplementation as is necessary to bring the earnings plus augmentation up to an agreed minimum wage. The augmentation and supplementation is paid by the Council.

HOME EMPLOYMENT

Arrangements are made under the Home Workers Scheme whereby blind persons desiring to work on their own account can do so in their homes, at occupation centres or elsewhere other than in special workshops, except that no blind person is allowed to participate in these arrangements unless he is capable of earning such minimum sum each week and for such period as may be determined by the Council.

The earnings of Home Workers are augmented by the County Council. The rates of augmentation for men range between £3 a week on net earnings of up to £4 a week and 15s. a week on net earnings of £8 8s. 0d. a week and over, with reduced rates for women.

The scheme also provides for payments during sickness, unemployment and holidays, and tests for admission to and retention in the scheme.

At 31st December, 1956, there were 56 persons in the Home Workers Scheme—40 males and 16 females. The trades followed, and the number in each, were as follows:—

	Male	Female
Basket makers	12	—
Chair seaters	*5	—
Hand knitter	—	1
Machine knitters.. .. .	—	15
Mat-makers	4	—
Mattress-maker	1	—
Piano-tuners	14	—
Braille copyists	2	—
Woodworker	1	—
Shopkeeper	1	—

* Includes one partially-sighted person.

Home Workers are supervised by the Royal National Institute for the Blind, the National Library for the Blind, the Home Teachers and District Officers of the Department, and receive assistance in the disposal of their products.

The Department has continued to consult with the Ministry of Labour and National Service regarding suitable training and employment for employable blind persons.

The Service for placement of blind persons in open industry is provided by the Royal National Institute for the Blind on behalf of the County Council.

FOLLOW-UP OF TREATMENT RECOMMENDED FOR REGISTERED BLIND
AND PARTIALLY-SIGHTED PERSONS

Number of cases registered during 1956 in respect of whom Section F.1 of forms B.D.8 completed by examining ophthalmologists recommended:—	Cause of disability				
	Cataract	Glaucoma	Retrolental Fibroplasia	Others	Total
(a) No treatment	119	56	5	263	443
(b) Treatment:					
(i) Medical	12	12	—	81	105
(ii) Surgical	90	12	—	25	127
(iii) Optical	13	—	—	25	38
TOTALS	234	80	5	394	713
Number of cases at (b) above which, on follow-up action, have:—					
received treatment	30	6	—	53	89
Commenced and were continuing to receive treatment	5	3	—	24	32
Decided to have treatment some time in the future ..	19	5	—	25	49
Been found unfit to undergo treatment	24	3	—	7	34
Refused treatment	22	3	—	11	36
Died since recommendation was made	12	4	—	10	26
Left the County before follow-up completed	3	—	—	1	4
TOTALS	115	24	—	131	270

OPHTHALMIA NEONATORUM

Sixteen cases of Ophthalmia Neonatorum were notified during the year 1956.

In none of these was vision lost or impaired and none remained under treatment at the end of the year.

WELFARE SERVICES FOR THE HANDICAPPED

In my last Annual Report, I recorded that schemes submitted to the Minister of Health under the National Assistance Act, 1948, Sections 29 and 30, to provide Welfare Services for (a) handicapped persons other than the blind, partially-sighted and deaf or dumb, and (b) persons who are deaf or dumb, had been approved by the Minister.

During the year 1956, a survey was made with a view to ascertaining the nature and extent of the needs to be met. Following this survey, arrangements were made under the scheme (a) referred to above, to exercise the County Council's mandatory duties under the heading of 'Social Welfare', the District Officers being made responsible for providing these services and for adaptations to be carried out, in appropriate cases, at the homes of handicapped persons. Seventeen persons were assisted with such adaptations which were mainly to facilitate the use by them of invalid carriages.

Further consideration has yet to be given to the implementation of other powers in the schemes.

AMBULANCE SERVICE

The Ambulance Service provided under Section 27 of the National Health Service Act, 1946 operates from twenty-one ambulance stations with which are associated six places with telephones where vehicles can be stationed, generally in the day-time. Five of the smaller stations are operated by voluntary associations under agency arrangements, two of them being small country stations manned entirely by volunteers. In addition a service to cover Canterbury and the adjacent county area is operated jointly by the Canterbury City Council and the County Council from a station in Canterbury. The Hospital Car Service is used to provide supplementary transport for sitting patients.

The County Council has arrangements with neighbouring local health authorities, on a reciprocal basis, for the nearest available ambulance to answer an emergency call; with the London County Council and the Canterbury City Council for the conveyance of patients suffering from typhus or smallpox; and in one small country district the County Council provides a general ambulance service for the East Sussex County Council.

OPERATIONAL CONTROL

The provision of transport is controlled in the following ways:—

(a) *Stretcher Patients*

Requests, other than emergencies, for transport for stretcher patients are only accepted from medical practitioners, hospitals, midwives and nurses. Medical certificates are not required but the reason for the journey must be given to show that it is one for which the provision of special transport is justified.

(b) *Sitting Patients*

Except in an emergency, transport for sitting patients is usually only provided on receipt of a special form which includes information as to the nature of case, reason for the journey and a certificate which must be signed by a medical practitioner. In the case of continuing journeys, a new form is required each calendar month for each patient.

EMERGENCY CALLS

The control rooms at the ambulance stations at Broadstairs, Bromley, Chatham (which also covers the Sittingbourne and Sheerness Stations) and Tunbridge Wells (which also covers the Cranbrook and Sevenoaks Stations) are manned on a 24-hour basis. In the areas served by these ambulance stations all emergency calls are sent by the Post Office direct to the ambulance service and in the other areas of the County such calls are routed by the Post Office to the nearest manned fire station which then passes the call to the nearest manned ambulance station. This arrangement effects a substantial economy in staff time. Special stocks of blankets, stretchers and first aid equipment are kept at certain ambulance stations for use in major disasters.

The total number of accident and emergency patients attended to by ambulances during the year was 14,506 which represents 2.4 per cent of all patients conveyed by the service and the average time taken to reach the scenes of accidents and emergencies from the receipt of the call was 5.8 minutes.

CO-ORDINATION OF JOURNEYS

Journeys are co-ordinated whenever possible so that a number of patients can be conveyed together in the same vehicle. All journeys of twenty miles or over are reported to the County Health Department for co-ordination and shorter journeys are co-ordinated at the ambulance stations and, where appropriate, in conjunction with neighbouring stations.

RAIL JOURNEYS

Rail transport is used for long distance journeys where practicable and specially designed stretchers are available which can be used in railway carriages and also on the standard stretcher fittings in ambulances. During 1956, 3,633 patients were conveyed by rail as compared with 2,897 in 1955. It is right to place on record the excellent arrangements made by the staff of British Railways for the welfare and comfort of patients carried by train.

RADIO-TELEPHONY

The whole County is covered by the radio-telephony system of communication but the arrangements cannot be fully effective in the Bexley, Crayford, Dartford and Erith area until it is possible to establish a new control centre in the area. The system comprises six main transmitting stations and 170 two-way mobile sets in vehicles. All vehicles operating locally are radio-controlled and the equipment has been modified to enable inter-vehicle communication, which is of considerable value.

MAINTENANCE AND REPAIR ORGANISATION

The maintenance and repair of ambulance service vehicles is done by mechanics attached to the ambulance service organisation and, under the supervision of the ambulance service engineers, by commercial garages. Workshop facilities are now provided at three ambulance stations but similar provision will also be made in new station buildings. Ambulance stations where workshop facilities are not available are visited by the mechanics, who are provided with specially fitted service vans, to carry out routine inspections, maintenance and minor repairs.

STATION ACCOMMODATION

Many of the ambulance service premises are unsatisfactory being inadequate both as to office and staff accommodation generally and also as regards garage accommodation. Consequently heavy expenditure is incurred in hiring private garage accommodation and in taking vehicles to and from these garages. The costs resulting from the deterioration of vehicles which have to be left in the open also have to be met. The Council has accordingly approved a policy of improvement to include the provision of eight further new stations as soon as practicable, the extension of one other and either the extension or replacement of another. It was proposed to proceed with four of the new stations during 1956, namely those at Crayford, to replace the present stations at Bexley, Dartford and Erith; at Maidstone and at Northfleet, respectively, to replace the present stations in those towns; and at Southborough to replace the existing station at Tunbridge Wells. The Minister of Health, however, whilst recognising the need for these stations to be provided as soon as possible, has been unable to approve of their proceeding whilst capital expenditure is restricted.

STATISTICS

The following table shows the decrease effected in the number of miles per patient as a cumulative result of measures introduced to promote economy in the ambulance service. It is noteworthy that, having regard to the progressive reductions which have been effected over such a long period, the year's working shows a further reduction in this figure during 1956:—

<i>Period</i>		<i>Patients</i>	<i>Mileage</i>	<i>Mileage per Patient</i>
Year ended 31.12.51	..	436,233	3,894,912	8.93
" " 31.12.52	..	520,675	3,899,458	7.49
" " 31.12.53	..	572,108	3,972,118	6.94
" " 31.12.54	..	614,505	4,022,462	6.54
" " 31.12.55	..	609,224	3,886,692	6.38
" " 31.12.56	..	608,838	3,700,494	6.08

The following statement shows the vehicle position at the end of 1956:—

	<i>Ambulances for recumbent patients</i>	<i>Ambulances for sitting patients</i>
Vehicles operated by the Council	132	86
County vehicles allocated to the Canterbury Joint Service	4	1
County vehicles loaned to Voluntary Associations ..	11	8
Vehicles owned and operated by Voluntary Associations	1	—
	<hr/> 148	<hr/> 95

OPERATIONAL STATISTICS

<i>Ambulance Service Vehicles</i>	1956	1955
Total Mileage	3,560,857	3,729,601
Number of Journeys	136,788	141,805
" " Patients carried	599,423	598,603
" " Emergency cases	14,506	15,644
<i>Hospital Car Service</i>		
Total Mileage	139,637	157,091
Number of journeys	3,245	3,638
" " patients carried	9,415	10,621
<i>Whole Service</i>		
Total Mileage	3,700,494	3,886,692
Number of journeys	140,033	145,443
" " patients carried	608,838	609,224

MENTAL HEALTH

There has been no variation in the organisation of the Mental Health Service. The medical staff employed comprises a Senior Assistant County Medical Officer, whose duties are principally in connection with mental deficiency. This officer receives part-time assistance from two whole-time Medical Officers and part-time assistance on a sessional basis from a qualified medical practitioner. Certain whole-time officers of the Regional Hospital Board are available for consultation.

During the year, medical staff carried out 457 examinations in connection with ascertainment, certification and discharge.

MENTAL DEFICIENCY

At the end of the year there were under supervision 2,014 mental defectives living in the community; this figure excludes a further 74 under Guardianship and 83 on licence from Mental Deficiency Institutions, supervised on behalf of the Regional Hospital Boards by officers of the Council. In addition, 286 defectives discharged from Mental Deficiency Institutions were visited to see if help or advice was needed.

Supervisory staff comprises one Mental Health Officer, seven Assistant Mental Health Officers and, in certain districts, the Health Visitors. The Guardianship Society, Hove, on behalf of the County Council, supervises 18 of the defectives under Guardianship.

The use of Health Visitors for the purpose of supervision has been further extended and the area covered by them now includes Gravesend, Medway Towns, Sittingbourne, Faversham and the surrounding rural areas; here they are responsible for the supervision of all female defectives, the legal formalities in connection with certification and admission to institutions being carried out, as before, by the District Officers.

During the year, two new Occupation Centres were opened in rented premises, one at Ashford to serve the town and surrounding rural area, and the other at Bobbing to serve the Isle of Sheppey, Sittingbourne, Faversham and the local villages, making a total of ten Centres provided by the Council. This has resulted in an increase in the numbers attending Occupation Centres and there are now 394 defectives receiving training. The staff at the Centres has correspondingly increased to 10 Supervisors, 28 Assistant Supervisors, and 1 male Assistant Supervisor who continues to divide his time between the Centres at Crayford and Orpington.

The provision of transport to Occupation Centres has been extended to all Centres provided by the Council. A small number of Kent defectives from Whitstable and Aylesham, who attend Canterbury Centre by arrangement with the City Council, continue to use public transport services.

With the opening of the two new Centres, there has been a decrease in the number of defectives included in the Home Teaching Scheme and there are now 149 defectives receiving training from the 8 Home Teachers employed. Three of the Home Teaching classes, namely those at Ashford, Sheerness and Sittingbourne, have been closed, but the one at St. Paul's Cray continues for one half-day a week.

The waiting list for institutional care decreased slightly and at the end of the year there were 353 defectives waiting as compared with 379 at the end of the previous year. In spite of this, applications for short-term care increased and 77 defectives received this type of care during the year.

LUNACY AND MENTAL TREATMENT

The duties of duly authorised officers under the Lunacy Mental Treatment and Mental Deficiency Acts are carried out by 21 District Officers of the Health Department and 22 Assistant District Officers are authorised to act similarly in emergency or by way of relief. The number of patients dealt with by these officers during the year under the Lunacy and Mental Treatment Acts was 1,589.

No defined arrangements exist for the joint use of officers of the Regional Hospital Board in the supervision of patients discharged from mental hospitals. Such duties are normally discharged by officers of the Board, but the Council's officers assist with such visitation, when requested, and liaison is maintained between the duly authorised officers and the psychiatric social workers at mental hospitals.

After-care of patients discharged from the Services on psychiatric grounds is undertaken by the duly authorised officers.

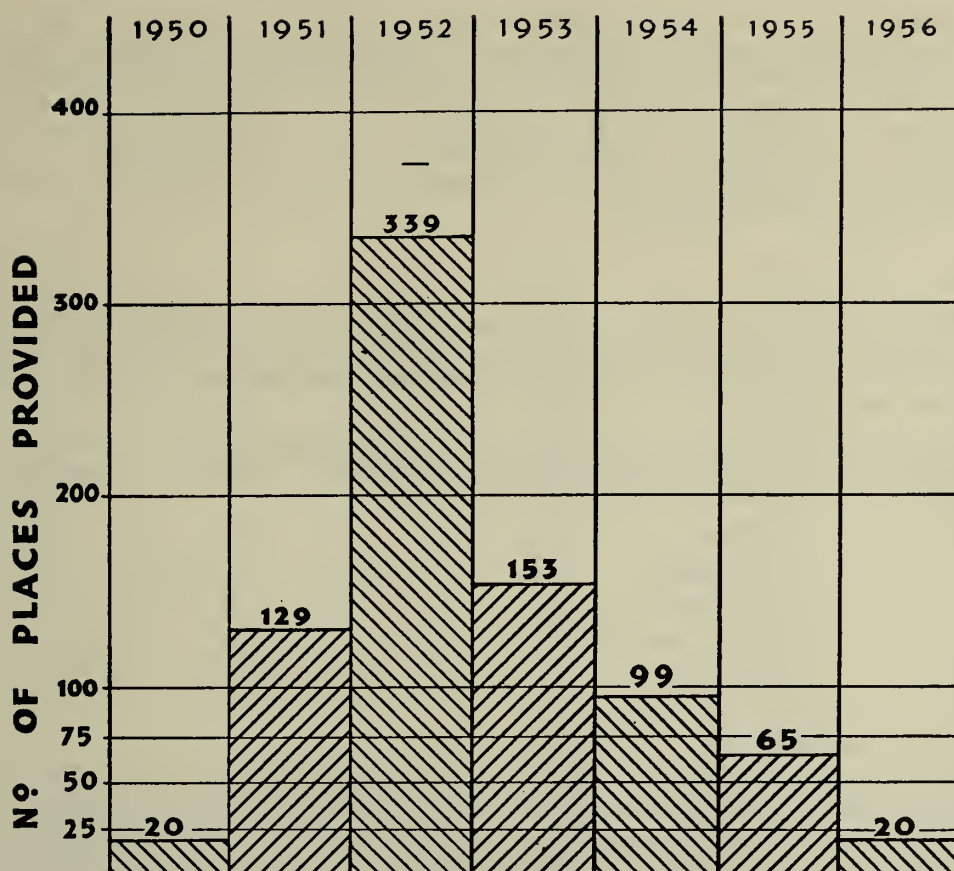
RESIDENTIAL SERVICES

RESIDENTIAL ACCOMMODATION FOR ELDERLY AND DISABLED PERSONS

Homes provided directly by the County Council and residential accommodation at hospitals are:—

<i>County Homes</i>				<i>At Hospitals</i>			
				Administered by Hospital Management Committees unless otherwise indicated.			
AREA 1 (Pop. approx. 206,350)	Old Rectory, Smarden	..	.. 30				
	Woodside, Dover	..	.. 20	St. Mary's, Etchinghill	..	.. 110	
	Leahurst, Dover	..	.. 20	West View, Tenterden	..	.. 48	
	Cairn Ryan, Dover	..	.. 25				
	General's Meadow, Walmer	..	.. 38				
			133				158
AREA 2 (Pop. approx. 178,650)	Eastry House, Eastry	..	.. 28	The Close, Bridge (K.C.C.)	..	.. 51	
	Brendon, Margate	..	.. 26	Hill House, Minster	..	.. 76	
	Radley, Tankerton	..	.. 30	Eastry Hospital	..	.. 45	
			84				172
AREA 3 (Pop. approx. 143,650)	East Hall, Maidstone	..	.. 19	Linton Hospital	..	.. 82	
	Hartley House, Cranbrook	..	.. 113				82
			132				
AREA 4 (Pop. approx. 142,700)	Pembury Grange, Tunbridge Wells	..	.. 39	Sundridge Hospital	..	.. 2	
	Sandhurst, Tunbridge Wells	..	.. 30				
	Court Royal, Tunbridge Wells	..	.. 31				
	Oakhurst, Hildenborough	..	.. 24				
	Kippington House, Sevenoaks	..	.. 37				2
			161				
AREA 5 (Pop. approx. 356,400)	Blackburn, Sheerness	..	.. 37	Bensted House, Faversham (K.C.C.)	..	.. 90	
	Medway Homes, Rochester	..	.. 162	Milton Regis	..	.. 77	
				All Saints', Chatham	..	.. 17	
				St. James', Gravesend	..	.. 80	
			199				264
AREA 6 (Pop. approx. 249,650)	St. Mary's, Bexley	..	.. 39	West Hill, Dartford	..	.. 73	
	The Mount, Nr. Dartford	..	.. 32				
	Manor Gate, Nr. Dartford	..	.. 29				
	Darenth Grange, Nr. Dartford	..	.. 58				
	Old Downs, Hartley	..	.. 39				
	Holywell, Nr. Meopham	..	.. 48				
	Russell House, Bexleyheath	..	.. 50				
			295				73
AREA 7 (Pop. approx. 323,700)	Lubbock House, Orpington	..	.. 20	Orpington	..	.. 56	
	Elmbank, Bromley	..	.. 37				
	Durham House, Beckenham	..	.. 38				
	Selwood, Chislehurst	..	.. 38				
			133				56
	Total for Homes	..	1,137	Total for Hospitals	..	807	
TOTAL				1,944			

During 1956, accommodation in Homes provided directly by the Council was increased, on completion of the extension at St. Mary's, Bexley, only by 20 places. Reference has been made in previous Annual Reports to the uneven rate at which additional accommodation has been provided to meet the ever increasing waiting list. The following chart shows the number of new beds brought into use each year:—



So far as the waiting list is concerned, there were 898 applications accepted during the year. In the same period, 87 names were removed from the list by reason of death and a further 70 because the applicants' condition had deteriorated to the extent of making them a hospital responsibility. The waiting list of 616 at the end of year was 25 more than at the beginning of the year.

The year saw the completion of Russell House providing 50 beds at Bexleyheath, which is the first Old People's Home the Council has built specially for this purpose; all the others being in adapted properties. The plans were first prepared in 1951 but by reason of financial difficulties it was not until 1955 that building work started. One scheme which was started in 1956 was the adaptation of a house next door to Durham House, Beckenham, to which it will in due course be added to accommodate 24 old people. Another building scheme started was the adaptation of "Hardwick", Hildenborough, for 60 infirm men and women. This Home is due for occupation in the early summer of 1957 and will permit of a number of smaller Homes reverting to their proper role of providing for those not in need of more or less constant care and attention. A third project to provide for 22 infirm men due for completion in 1957, is in a bungalow building, formerly used temporarily for hospital purposes, at Bensted House, Faversham. The installation of an oil-fired central heating and domestic hot water system at Hartley House, Cranbrook, has been completed at a cost of approximately £10,500 and substantial savings in labour have already been effected.

The presence of sick persons in the Council's Old People's Homes causes considerable strain on the limited staff resources, particularly at smaller establishments, but the numbers are not increasing to any marked extent. In 1956, 202 old people were transferred from County Homes to hospital: in 106 cases for chronic illnesses, the remainder for acute illnesses. 89 persons came from hospitals into Homes and, of these, 16 were subsequently re-admitted to hospital and 32 needed more than the general amount of medical care and attention. These figures concern separate Homes only and do not include the joint-user establishment where transfers between sick wards and residential accommodation are normal practice.

The increasing degree of infirmity in residents in Homes has an effect on staffing requirements and provision has needed to be made in the estimates for 1957/8 for additional staff. Experience is showing that three main types of Homes are needed and they are:—

Type 1: Homes for very infirm old people needing consistent attention at night.

Type 2: Homes for infirm old people who need only intermittent attention at night.

Type 3: Homes for reasonably active old people.

The staffing arrangements vary as between these three types. For instance at the first, one night attendant is on duty every night and sometimes two are needed. At the second a night attendant for five nights a week, the Matron and her assistant each cover one night a week "on call" and there is only one attendant at one time on duty by day. The third type is more lightly staffed and, except in emergencies, there is no one on duty at night. It is obviously desirable that each area should have Homes of each type so that as the need of any particular old person changes the transfer to a more suitable establishment will not mean difficulties in visitation by relations or friends. It is hoped in 1957 to make a start on the reclassification of Homes.

VOLUNTARY HOMES

The Homes provided by voluntary organisations continue to form a valuable supplement to the Council's own provision, although, with some exceptions, they provide mainly for relatively active old people. Maintenance costs for some 420 persons in voluntary organisations Old People's Homes are borne by the County Council.

Care of a specialised type for special classes of handicapped persons in need of residential care is generally provided on a regional basis by voluntary organisations. The numbers of such persons for whom the County Council pays maintenance charges are:—

Blind	..	..	..	..	..	74
Epileptics..	..	..	..	..	..	54
Cripples	..	..	..	..	..	19
Deaf and/or Dumb	..	..	..	..	..	9
Others	..	..	..	..	..	13

TEMPORARY ACCOMMODATION

In my annual reports for the past three years, the provision of temporary accommodation has called for little more than passing comment, because the Council's policy limiting the period in a year to three months created the situation when there was always vacant accommodation, notwithstanding the fact that no genuine application was refused. In 1956, the same pattern obtained, but for one major feature. That was the greatly increased demand for a few weeks during the third quarter of the year leading to five refusals of accommodation, a feature of which most careful examination has failed to reveal any predominant cause.

STATISTICAL TABLES

TABLE 1

Showing Population, Acreage and Density of Population of the various Districts of the County of Kent, in 1956 (mid-year)

DISTRICT	Mid-year Home* Population 1956 (as estimated by the Registrar-General)	Acreage inclusive of Water	Persons per Acre
Urban—			
Ashford U.	26,000	5,657	4.60
Beckenham B.	75,340	5,937	12.69
Bexley B.	89,300	4,869	18.34
Broadstairs and St. Peter's U.	16,240	2,771	5.86
Bromley B.	65,100	6,513	10.00
Chatham B.	49,900	4,371	11.42
Chislehurst and Sidcup U.	87,300	8,959	9.74
Crayford U.	29,530	2,544	11.60
Dartford B.	40,850	4,233	9.65
Deal B.	25,400	2,922	8.69
Dover B.	35,370	3,765	9.39
Erith B.	46,010	3,860	11.92
Faversham B.	12,310	2,994	4.11
Folkestone B.	44,900	4,006	11.21
Gillingham B.	77,630	8,351	9.30
Gravesend B.	47,670	4,014	11.88
Herne Bay U.	17,900	8,566	2.09
Hythe B.	9,600	3,013	3.19
Lydd B.	3,120	11,932	0.26
Maidstone B.	55,500	6,198	8.95
Margate B.	43,060	6,960	6.19
New Romney B.	2,350	1,514	1.55
Northfleet U.	19,850	3,768	5.27
Orpington U.	70,410	20,842	3.38
Penge U.	25,540	770	33.17
Queenborough B.	3,230	1,103	2.93
Ramsgate B.	36,030	3,624	9.94
Rochester B.	46,220	3,744	12.35
Sandwich B.	4,600	2,137	2.15
Sevenoaks U.	16,380	3,716	4.41
Sheerness U.	15,450	943	16.38
Sittingbourne and Milton U.	22,060	4,935	4.47
Southborough U.	8,880	1,758	5.05
Swanscombe U.	8,900	2,142	4.15
Tenterden B.	4,540	8,946	0.51
Tonbridge U.	20,270	4,599	4.41
Tunbridge Wells B.	38,900	6,034	6.45
Whitstable U.	17,360	7,640	2.27
TOTALS—Urban	1,259,000	190,650	6.60
Rural—			
Ashford, East	10,550	51,398	0.21
Ashford, West	10,330	39,455	0.26
Bridge-Blean	19,050	55,868	0.34
Cranbrook	15,070	41,315	0.36
Dartford	43,940	34,103	1.29
Dover	12,940	25,780	0.50
Eastry	24,400	54,276	0.45
Elham	9,450	36,676	0.26
Hollingbourn	16,660	56,796	0.29
Maidstone	18,720	34,487	0.54
Malling	37,700	45,655	0.83
Romney Marsh	4,510	31,035	0.15
Sevenoaks	35,170	62,959	0.56
Sheppey	9,430	20,319	0.46
Strood	23,420	48,811	0.48
Swale	20,290	62,015	0.33
Tenterden	7,260	38,002	0.19
Tonbridge	23,110	41,687	0.55
TOTALS—Rural	342,000	780,637	0.44
TOTALS—County	1,601,000	971,287	1.65

* The figures given in this column are the home populations, including members of the armed forces stationed in the area, and these populations form the basis of calculation of most of the rates given in this report.

TABLE 2

Showing Deaths, Births and Infantile Mortality in the different Urban and Rural Districts of the County of Kent in the year 1956.

DISTRICT	DEATHS			BIRTHS						INFANTILE MORTALITY			
	Number of deaths at all ages	Deaths per 1,000 of the population	Comparable Death-rate*	Legitimate	Illegitimate	TOTAL	Births per 1,000 of the population	Comparable Birth-rate*	Still-births	Legitimate	Illegitimate	TOTAL	Deaths of Infants under one year of age per 1,000 births
URBAN—													
Ashford U. ..	253	9.73	9.15	362	15	377	14.50	14.93	7	5	1	6	15.92
Beckenham B. ..	843	11.19	10.18	857	30	887	11.77	12.59	12	11	—	11	12.40
Bexley B. ..	388	9.38	11.63	1,143	34	1,177	13.18	13.58	25	28	1	29	24.64
Broadstairs U. ..	206	12.68	8.88	165	9	174	10.71	12.96	3	4	—	4	22.99
Bromley B. ..	765	11.75	10.93	763	39	802	12.32	12.57	9	12	1	13	16.21
Chatham B. ..	508	10.18	10.89	767	44	811	16.25	15.76	24	20	3	23	28.36
Chislehurst and Sidcup U. ..	675	7.73	10.20	1,200	44	1,244	14.25	13.82	30	27	3	30	24.12
Crayford U. ..	247	8.36	10.95	465	11	476	16.12	15.31	6	11	—	11	23.11
Dartford B. ..	563	13.78	10.06	608	24	632	15.47	14.85	8	11	3	14	22.15
Deal B. ..	291	11.46	11.12	385	18	403	15.87	16.82	18	10	1	11	27.30
Dover B. ...	382	10.80	10.69	569	34	603	17.05	17.05	12	10	—	10	16.58
Erith B. ..	464	10.08	11.79	626	22	648	14.08	14.08	10	6	2	8	12.35
Faversham B. ..	266	21.61	10.37	174	6	180	14.62	15.35	5	11	—	11	61.11
Folkestone B. ..	535	11.92	10.37	516	40	556	12.38	13.12	6	6	1	7	12.59
Gillingham B. ..	813	10.47	11.31	1,143	56	1,199	15.45	16.38	22	18	5	23	19.18
Gravesend B. ..	495	10.38	11.83	756	32	788	16.53	16.03	20	21	—	21	26.65
Herne Bay U. ..	349	19.50	10.14	199	10	209	11.68	14.83	1	3	—	3	14.35
Hythe B. ..	148	15.42	10.79	108	2	110	11.46	13.98	1	4	—	4	36.36
Lydd B. ..	18	5.77	7.04	38	3	41	13.14	16.43	1	2	—	2	48.78
Maidstone B. ..	670	12.07	9.78	743	39	782	14.09	14.23	19	14	3	17	21.74
Margate B. ..	563	13.07	10.19	587	67	654	15.19	16.56	12	21	1	22	34.11
New Romney B. ..	29	12.34	10.74	30	1	31	13.19	13.72	—	1	—	1	32.26
Northfleet U. ..	215	10.83	12.45	297	6	303	15.26	14.80	6	5	—	5	16.50
Orpington U. ..	648	9.20	9.94	1,174	45	1,219	17.31	17.14	20	25	—	25	20.51
Penge U. ...	297	11.62	11.39	469	26	495	19.38	17.44	10	8	1	9	18.18
Queenborough B. ..	47	14.55	16.30	50	5	55	17.03	17.54	2	1	—	1	18.18
Ramsgate B. ..	456	12.66	11.01	507	62	569	15.79	16.90	13	13	1	14	24.60
Rochester B. ..	492	10.64	11.70	677	23	700	15.14	14.84	12	7	1	8	11.43
Sandwich B. ..	42	9.13	8.22	53	3	56	12.17	14.12	2	2	—	2	35.71
Sevenoaks U. ..	216	13.19	10.82	209	7	216	13.19	13.98	9	2	—	2	9.26
Sheerness U. ..	190	12.30	13.04	239	15	254	16.44	17.92	4	2	1	3	11.81
Sittingbourne U. ..	397	18.00	12.06	316	16	332	15.05	15.50	7	8	1	9	27.11
Southborough U. ..	111	12.50	9.75	105	2	107	12.05	13.86	2	—	—	—	—
Swanscombe U. ...	81	9.10	11.19	139	2	141	15.73	14.63	2	3	—	3	21.28
Tenterden B. ..	91	20.04	8.42	58	3	61	13.44	14.78	1	2	—	2	32.79
Tonbridge U. ..	244	12.04	10.96	291	7	298	14.70	15.29	6	8	—	8	26.85
Tunbridge Wells B. ..	667	17.15	11.15	419	17	436	11.21	12.33	14	17	1	18	41.28
Whitstable U. ..	258	14.86	9.36	199	9	208	11.98	15.23	7	3	—	3	14.42
TOTALS IN URBAN DISTRICTS	14,377	11.42	10.85	17,406	828	18,234	14.48	14.91	368	362	31	393	21.55
RURAL—													
Ashford, East ..	116	11.00	9.13	135	11	146	13.84	15.50	4	2	1	3	20.55
Ashford, West ..	219	21.20	10.18	150	6	156	15.10	16.01	2	5	—	5	32.05
Bridge-Blean ..	355	18.64	9.13	211	9	220	11.55	13.63	4	6	1	7	31.82
Cranbrook ..	189	12.54	10.41	191	13	204	13.54	14.08	4	2	—	2	9.80
Dartford ..	457	10.40	11.23	710	30	740	16.84	16.17	11	11	1	12	16.22
Dover ..	119	9.20	8.10	187	4	191	14.76	17.27	3	6	—	6	31.41
Eastry ..	423	17.34	11.79	327	14	341	13.98	16.50	5	7	—	7	20.53
Elham ..	257	27.20	10.06	105	6	111	11.75	12.57	1	2	—	2	18.02
Hollingbourn ..	188	11.28	10.49	243	7	250	15.01	15.76	7	5	—	5	20.00
Maidstone ..	360	19.23	10.77	301	9	310	16.56	17.55	3	9	—	9	29.03
Malling ..	411	10.90	11.23	557	28	585	15.52	15.99	11	17	2	19	32.48
Romney Marsh ..	51	11.31	10.41	73	7	80	17.74	20.58	2	1	1	2	25.00
Sevenoaks ..	366	10.41	9.37	492	16	508	14.44	15.60	7	9	—	9	17.72
Sheppey ..	109	11.56	11.33	127	8	135	14.32	16.32	5	1	—	1	7.41
Strood ..	219	9.35	10.00	381	12	393	16.78	16.78	14	7	—	7	17.81
Swale ..	203	10.00	9.90	280	18	298	14.69	15.28	5	8	1	9	30.20
Tenterden ..	97	13.36	11.89	105	5	110	15.15	16.51	3	3	—	3	27.27
Tonbridge ..	253	10.95	9.96	287	19	306	13.24	13.11	9	10	—	10	32.68
TOTALS IN RURAL DISTRICTS	4,401	12.87	10.42	4,862	222	5,084	14.87	15.61	100	111	7	118	23.21
TOTALS IN URBAN DISTRICTS	14,377	11.41	10.85	17,406	828	18,234	14.48	14.91	368	362	31	393	21.55
TOTALS IN COUNTY ..	18,778	11.73	10.79	22,268	1,050	23,318	14.56	15.00	468	473	38	511	21.91

* Comparable rates are calculated in respect of each district, by applying to the crude-rate a factor which enables true comparison to be made with other areas after allowing for variations of age and sex in the constitution of the population.

TABLE 3

Showing the Number of Cases of Infectious Disease among the Civil Population, notified in each of the DISTRICTS in the County of Kent during the year 1956.

DISTRICT	Small-pox	Diphtheria (including Membranous Croup)	Erysipelas	Scarlet Fever	Enteric Fever	Puerperal Pyrexia	Acute Poliomyelitis including Acute Polioencephalitis		Acute Encephalitis		Meningococcal Infection	Ophthalmia Neonatorum	Respiratory Tuberculosis	Other forms of Tuberculosis	Acute Pneumonia (Primary or Influenzal)	Measles	Whooping Cough	Dysentery	Chicken-pox	Malaria
							Paralytic	Non-Paralytic	Infective	Post-Infectious										
URBAN—																				
Ashford U. . .	—	—	2	12	1	6	—	—	—	—	—	—	10	3	16	123	196	—	—	—
Beckenham B. . .	—	—	7	37	—	45	4	4	—	—	2	—	41	8	21	286	235	10	—	—
Bexley B. . .	—	—	9	81	18	14	1	3	—	—	—	1	84	9	23	124	118	2	—	1
Broadstairs U. . .	—	—	3	13	—	—	1	1	—	—	1	—	11	1	14	25	62	6	224	—
Bromley B. . .	—	—	9	14	1	22	3	1	—	—	2	—	42	2	18	103	100	70	—	—
Chatham B. . .	—	—	4	13	4	50	2	1	—	—	—	2	46	4	19	7	82	20	—	—
Chislehurst and Sidcup U. . .	—	—	1	75	1	6	4	1	—	—	1	10	83	2	43	156	309	168	—	—
Crayford U. . .	—	—	—	44	3	6	1	—	—	—	—	—	18	3	9	7	25	—	—	—
Dartford B. . .	—	—	2	21	—	11	2	1	—	—	—	—	43	2	24	44	52	121	—	—
Deal B. . .	—	—	—	9	—	—	—	—	—	—	—	—	10	4	7	38	25	15	—	—
Dover B. . .	—	—	1	14	—	3	—	—	—	1	—	—	36	4	41	58	79	—	—	—
Erith B. . .	—	—	3	26	2	—	1	3	—	—	1	—	64	4	21	26	120	3	—	—
Faversham B. . .	—	—	—	7	—	1	1	—	—	—	—	—	11	1	18	2	14	—	—	—
Folkestone B. . .	—	—	11	6	—	2	—	1	—	—	—	—	24	1	35	13	112	1	2	—
Gillingham B. . .	—	—	3	35	—	2	1	—	—	—	1	2	75	3	21	12	72	4	—	—
Gravesend B. . .	—	—	4	43	—	8	1	—	—	—	—	—	31	5	11	100	220	18	—	—
Herne Bay U. . .	—	—	—	4	—	—	—	—	—	—	—	—	149	32	1	9	6	2	47	—
Hythe B. . .	—	—	—	1	—	—	—	—	—	—	—	—	3	—	6	—	31	1	—	—
Lydd B. . .	—	—	—	1	—	—	—	—	—	—	—	—	—	1	18	6	4	—	—	—
Maidstone B. . .	—	—	2	33	—	2	1	—	—	—	—	—	34	3	36	101	15	—	9	—
Margate B. . .	—	—	2	23	—	1	3	3	—	—	—	—	25	7	3	69	107	206	—	—
New Romney B. . .	—	—	—	6	—	—	—	—	—	—	—	—	2	—	17	67	5	—	—	—
Northfleet U. . .	—	—	3	74	—	1	1	—	—	—	—	—	11	—	20	46	44	—	—	—
Orpington U. . .	—	—	3	40	1	72	5	5	—	—	2	—	58	3	43	33	227	50	—	—
Penge U. . .	—	—	6	7	2	1	—	—	—	—	1	—	28	1	5	11	257	1	—	—
Queenborough B. . .	—	—	1	5	1	—	—	—	—	—	—	—	1	—	1	48	14	—	—	—
Ramsgate B. . .	—	—	3	15	—	3	—	—	—	—	—	—	40	2	10	444	231	3	—	—
Rochester B. . .	—	—	1	10	1	2	—	—	—	—	—	—	31	4	28	7	36	4	—	—
Sandwich B. . .	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	1	13	—	—	—
Sevenoaks U. . .	—	—	—	—	—	—	1	—	—	1	—	—	6	3	5	23	25	—	—	—
Sheerness U. . .	—	—	3	48	—	1	—	—	—	—	—	—	12	—	2	20	226	—	—	—
Sittingbourne U. . .	—	—	1	13	—	1	—	—	—	—	—	—	15	—	—	6	11	—	—	—
Southborough U. . .	—	—	1	5	—	—	1	1	—	—	—	—	5	—	—	4	39	—	—	—
Swanscombe U. . .	—	—	—	40	1	—	—	—	—	—	—	—	3	2	7	16	16	14	—	—
Tenterden B. . .	—	—	—	2	—	—	—	—	—	—	—	—	1	—	—	1	—	20	—	—
Tonbridge U. . .	—	—	—	6	—	—	1	1	—	—	—	—	8	2	5	4	62	2	—	—
Tunbridge Wells B. . .	—	—	5	10	5	2	2	3	—	—	2	1	16	5	9	13	54	4	—	—
Whitstable U. . .	—	—	4	23	—	1	—	—	—	—	1	—	6	—	15	4	11	1	—	—
TOTALS IN URBAN DISTRICTS . .	—	—	95	816	41	263	37	29	—	2	14	16	1,083	121	572	2,057	3,255	746	282	1
RURAL—																				
Ashford, East . . .	—	—	—	2	—	—	1	—	—	—	1	—	2	—	5	28	74	—	—	—
Ashford, West . . .	—	—	1	27	1	—	—	—	—	—	—	—	3	—	3	19	77	—	—	—
Bridge-Blean . . .	—	—	2	7	—	—	—	—	1	—	—	—	4	4	7	78	31	7	—	—
Cranbrook . . .	—	—	—	19	—	1	—	—	—	—	—	—	2	—	7	288	71	35	—	—
Dartford . . .	—	—	—	28	2	1	1	2	—	—	—	—	28	1	16	120	127	32	—	—
Dover . . .	—	—	—	—	—	—	2	2	—	1	—	—	1	—	5	9	7	—	—	—
Eastry . . .	—	—	—	4	—	—	—	—	—	—	—	—	20	3	7	184	25	120	—	—
Elham . . .	—	—	—	—	—	1	—	—	—	—	—	—	7	—	5	51	15	—	—	—
Hollingbourn . . .	—	—	1	1	—	—	1	—	—	—	—	—	12	2	2	22	1	2	—	—
Maidstone . . .	—	—	2	10	—	3	—	—	—	—	—	—	6	—	19	90	25	—	—	—
Malling . . .	—	—	4	5	—	—	—	1	—	—	—	—	14	1	52	64	85	1	—	—
Romney Marsh . . .	—	—	—	2	—	—	—	—	—	—	—	—	1	1	10	46	2	—	—	—
Sevenoaks . . .	—	—	14	18	1	2	2	—	—	—	1	—	6	1	61	79	171	8	—	1
Sheppey . . .	—	—	2	9	—	—	—	—	1	—	—	—	6	—	13	59	89	—	—	—
Strood . . .	—	—	2	7	—	—	2	—	—	—	—	—	17	2	2	7	19	3	—	—
Swale . . .	—	—	—	19	—	—	1	—	—	—	—	—	10	1	23	15	29	—	—	—
Tenterden . . .	—	—	1	3	—	—	1	—	—	—	—	—	1	1	1	7	5	2	—	—
Tonbridge . . .	—	—	6	9	—	2	15	15	—	—	—	—	2	2	14	5	116	13	—	—
TOTALS IN RURAL DISTRICTS . .	—	—	35	170	4	10	26	20	2	1	2	—	142	19	252	1,171	969	223	—	1
TOTALS IN URBAN DISTRICTS . .	—	—	95	816	41	263	37	29	—	2	14	16	1,083	121	572	2,057	3,255	746	282	1
TOTALS IN COUNTY . .	—	—	130	986	45	273	63	49	2	3	16	16	1,225	140	824	3,228	4,224	969	282	2

TABLE 4

Showing the number of notifications, incidence rates, deaths and death-rates of the principal infectious diseases in the County.

Year	1938	1955	1956	
			Kent	England and Wales (provisional)
SMALL POX				
No. of cases notified ..	4	—	—	—
Incidence rate	0·004	—	—	—
No. of deaths	2	—	—	—
Death rate	0·001	—	—	—
SCARLET FEVER				
No. of cases notified ..	2,913	1,111	986	33,096
Incidence rate	2·102	0·701	0·616	0·741
No. of deaths	10	—	—	15
Death rate	0·007	—	—	0·000
DIPHTHERIA				
No. of cases notified ..	1,361	—	—	63
Incidence rate	0·982	—	—	0·002
No. of deaths	58	—	—	8
Death rate	0·042	—	—	0·000
ENTERIC FEVER				
No. of cases notified ..	54	12	45	140
Incidence rate	0·039	0·008	0·028	0·003
No. of deaths	5	—	—	2
Death rate	0·005	—	—	0·000
MEASLES				
No. of cases notified ..	—*	31,192	3,228	160,459
Incidence rate	—*	19·689	2·016	3·59
No. of deaths	10	1	1	30
Death rate	0·007	0·001	0·001	0·001
WHOOPING COUGH				
No. of cases notified ..	—*	3,672	4,224	92,396
Incidence rate	—*	2·317	2·638	2·07
No. of deaths	10	2	2	95
Death rate	0·007	0·001	0·001	0·002
POLIOMYELITIS AND POLIOENCEPHALITIS				
No. of cases notified ..	36	264	112	3,205
Incidence rate	0·026	0·167	0·070	0·718
No. of deaths	—	17	8	114
Death rate	—	0·011	—	0·003

* Not compulsorily notifiable.

TABLE 5

Showing causes of deaths in the URBAN DISTRICTS of Kent during the year 1956.

DISTRICT	Tuberculosis, respiratory	Tuberculosis, other	Syphilitic disease	Diphtheria	Whooping-cough	Meningococcal infections	Acute poliomyelitis	Measles	Other infective and parasitic diseases	Malignant neoplasm					Leukaemia, aleukaemia	Diabetes	Vascular lesions of nervous system	Coronary disease, angina	Hypertension with heart disease	Other heart disease	Other circulatory disease	Influenza	Pneumonia	Bronchitis	Other diseases of respiratory system	Ulcer of stomach and duodenum	Gastritis, enteritis and diarrhoea	Nephritis and nephrosis	Hyperplasia of prostate	Pregnancy, childbirth, abortion	Congenital malformations	Other defined and ill-defined diseases	Motor-vehicle accidents	All other accidents	Suicide	Homicide and operations of war	All causes	
										Stomach	Lung, bronchus	Breast	Uterus	Other malignant and lymphatic neoplasms																								
Ashford U.	—	—	2	—	—	—	1	—	—	5	10	3	—	20	—	45	6	41	6	41	6	1	7	17	2	5	1	1	3	5	1	18	2	2	6	1	6	253
Beckenham B.	2	—	3	—	—	—	—	—	2	17	30	23	6	76	4	161	14	138	14	138	44	2	31	50	6	12	4	4	5	4	4	60	2	4	8	—	—	843
Bexley B.	9	1	3	—	—	—	1	—	1	22	28	15	7	94	8	144	15	97	15	97	37	1	39	55	9	10	6	6	5	3	1	20	11	5	12	—	—	838
Broadstairs and St. Peters U.	—	—	—	—	—	—	—	—	—	20	37	14	5	15	—	31	8	24	8	24	11	1	5	9	—	1	—	—	—	—	—	65	11	4	8	—	—	206
Bromley B.	1	—	—	—	—	2	—	—	3	3	14	2	8	42	3	61	13	89	22	89	15	1	33	32	8	8	7	3	4	7	1	51	7	6	11	—	—	765
Chatham B.	—	—	—	—	—	—	—	—	3	12	22	8	8	77	8	151	22	95	13	95	15	1	24	33	4	7	3	3	5	2	3	42	9	15	6	—	—	508
Chislehurst and Sidcup U.	9	2	1	—	—	—	—	—	2	12	31	20	1	63	5	118	11	82	11	82	38	1	42	40	6	2	2	4	5	4	59	8	10	3	3	1	—	675
Crayford U.	3	—	1	—	—	—	—	—	1	7	12	3	1	23	3	35	10	23	10	23	8	—	17	22	3	6	6	2	1	1	5	19	3	3	3	1	—	247
Dartford B.	3	—	2	—	—	—	—	—	—	9	14	7	6	48	4	84	11	75	11	75	43	—	62	29	10	8	2	4	5	2	6	49	4	4	7	9	—	563
Deal B.	3	—	1	—	—	—	—	—	—	8	10	7	1	31	1	37	3	46	11	46	18	3	10	14	3	2	2	4	4	4	26	3	3	7	—	—	291	
Dover B.	4	1	1	—	—	—	—	—	2	14	23	9	2	33	1	61	8	55	8	55	11	1	15	20	6	3	2	2	1	5	36	1	4	5	2	—	382	
Erith B.	4	—	1	—	—	—	—	—	1	15	17	8	4	48	3	59	11	82	23	91	2	21	37	2	4	2	2	1	5	2	46	1	4	5	—	—	464	
Faversham B.	—	—	—	—	—	—	—	—	2	11	3	5	2	21	2	26	5	96	9	96	9	1	4	13	2	4	2	2	2	6	2	17	1	2	5	—	—	266
Folkstone B.	6	—	—	—	—	—	—	—	3	17	32	15	4	44	3	70	9	102	21	102	21	4	18	29	4	7	2	2	9	6	46	7	13	5	—	—	535	
Gillingham B.	—	—	—	—	—	—	—	—	3	17	20	13	5	74	6	117	27	125	77	125	42	2	37	51	11	7	7	7	7	6	66	7	13	12	1	—	—	813
Gravesend B.	4	1	1	—	1	—	—	—	—	5	8	8	1	42	1	67	7	83	7	83	15	1	20	35	2	8	4	2	4	3	36	1	10	4	—	—	495	
Herne Bay U.	1	1	2	—	—	—	—	—	1	1	2	1	1	19	1	22	26	3	24	8	—	21	6	3	2	2	2	1	1	4	15	1	5	2	—	—	349	
Hythe B.	—	—	—	—	—	—	—	—	1	2	1	4	1	1	—	1	1	6	—	6	—	—	1	6	—	—	—	—	—	—	15	1	5	2	—	—	148	
Lydd B.	—	—	—	—	—	—	—	—	1	1	2	—	—	1	—	1	1	6	—	6	—	—	2	42	3	8	—	2	6	3	46	5	16	11	—	—	23	
Mairstone B.	6	—	1	—	—	1	—	—	1	14	12	11	6	50	4	85	17	157	29	157	29	3	37	42	3	8	—	2	6	3	2	56	7	6	9	—	—	670
Margate B.	4	—	3	—	—	1	—	—	4	10	20	14	1	60	4	88	9	101	24	101	24	1	13	17	3	6	—	1	1	4	56	7	6	9	—	—	559	
New Romney B.	—	—	—	—	—	—	—	—	—	1	—	—	—	3	—	29	2	55	9	55	9	—	6	13	6	2	1	1	1	—	20	1	—	—	—	—	29	
Northfleet U.	3	4	2	—	—	—	1	—	1	17	34	10	6	64	3	111	11	50	28	28	13	2	70	50	15	13	4	4	4	4	48	6	10	5	2	—	215	
Orpington U.	3	—	—	—	—	—	—	—	1	11	14	4	—	19	1	50	9	44	13	44	13	1	9	24	3	7	1	1	2	1	20	3	3	7	—	—	648	
Penge U.	5	1	2	—	—	—	—	—	1	2	2	—	2	2	—	10	1	4	4	4	1	4	5	1	2	2	2	2	7	5	4	55	2	8	3	1	—	47
Queenborough B.	—	—	—	—	—	—	—	—	1	18	23	6	2	43	2	56	10	83	19	83	19	—	30	18	1	9	1	3	6	5	37	4	15	5	—	—	456	
Ramsgate B.	2	1	2	—	—	—	—	—	1	4	8	6	4	40	3	61	12	73	18	73	18	6	19	24	6	2	2	2	7	5	4	37	4	15	5	—	—	492
Rochester B.	—	—	—	—	—	—	—	—	1	1	1	—	1	5	—	2	1	7	5	7	5	—	4	5	1	9	1	1	1	2	10	1	—	—	—	—	216	
Sandwich B.	—	—	—	—	—	—	—	—	1	7	7	2	1	13	1	26	4	43	5	43	5	—	19	11	4	3	2	—	2	2	17	1	—	—	—	—	397	
Sevenoaks U.	—	—	—	—	—	—	—	—	—	4	8	6	4	28	—	36	4	20	14	20	14	—	19	11	2	3	3	—	2	2	22	2	4	1	2	—	—	42
Sheerness U.	—	—	—	—	—	—	—	—	—	7	7	2	1	13	1	34	4	43	5	43	5	—	4	13	2	1	2	2	2	2	17	1	—	—	—	—	216	
Sittingbourne and Milton U.	3	1	1	—	—	—	—	—	—	10	11	8	1	21	—	54	3	103	19	103	19	3	11	17	3	3	3	—	3	1	193	2	4	5	2	—	—	193
Southborough U.	—	—	2	—	—	—	—	—	—	1	7	1	3	8	—	13	3	18	6	18	6	1	1	6	3	1	1	—	2	2	9	1	3	1	3	—	—	111
Swanscombe U.	—	—	—	—	—	—	—	—	—	1	3	1	3	9	—	14	1	13	3	13	3	—	1	2	1	1	—	1	1	—	7	—	—	—	—	—	81	
Tenterden B.	—	—	—	—	—	—	—	—	—	—	3	1	—	8	—	6	1	43	1	43	1	—	2	2	1	—	—	—	—	—	6	—	—	—	—	—	91	
Tonbridge U.	3	—	—	—	—	—	—	—	—	4	7	10	3	26	5	38	6	18	11	18	11	1	20	6	—	3	—	4	4	20	1	6	1	1	—	—	91	
Tunbridge Wells B.	6	1	4	—	—	—	—	—	2	12	22	10	4	77	1	95	14	121	43	121	43	2	25	28	5	11	—	2	5	7	63	1	25	3	3	1	—	244
Whitstable U.	4	—	—	—	—	—	—	—	—	6	5	10	3	20	3	39	3	58	19	58	19	1	3	7	1	—	—	—	—	—	14	—	8	2	—	—	667	
TOTALS IN URBAN DISTRICTS	112	17	37	—	2	4	5	—	35	337	530	287	102	1,310	81	2,024	2,155	2,999	2,377	678	46	683	791	138	183	69	123	107	4	88	1,162	105	255	140	9	—	14,377	

TABLE 6
Showing causes of deaths in the RURAL DISTRICTS of Kent during the year 1956.

DISTRICT	Tuberculosis, respiratory	Tuberculosis, other	Syphilitic disease	Diphtheria	Whooping-cough	Meningococcal infections	Acute poliomyelitis	Measles	Other infective and parasitic diseases	Malignant neoplasm					Leukaemia, aleukaemia	Diabetes	Vascular lesions of nervous system	Coronary disease, angina	Hypertension with heart disease	Other heart disease	Other circulatory disease	Influenza	Pneumonia	Bronchitis	Other diseases of respiratory system	Ulcer of stomach and duodenum	Gastritis, enteritis and diarrhoea	Nephritis and nephrosis	Hyperplasia of prostate	Pregnancy, childbirth, abortion	Congenital malformations	Other defined and ill-defined diseases	Motor-vehicle accidents	All other accidents	Suicide	Homicide and operations of war	All causes
										Stomach	Lung, bronchus	Breast	Uterus	Other malignant and lymphatic neoplasms																							
Ashford, East	1	—	3	—	—	—	—	—	1	2	5	—	—	—	—	15	16	4	4	27	4	—	—	5	7	4	4	—	—	1	—	—	9	—	1	—	125
Ashford, West	—	—	—	—	—	—	—	—	—	12	5	—	—	—	—	24	23	18	25	53	23	7	—	9	32	—	1	—	—	—	—	18	—	—	—	219	
Bridge-Blean	4	—	—	—	—	—	—	—	1	4	6	5	—	—	—	36	30	6	47	96	5	—	—	11	9	4	7	—	—	—	30	—	6	—	—	355	
Cranbrook	—	—	—	—	—	—	—	—	—	7	7	1	1	—	—	18	33	6	47	14	24	1	—	14	4	5	—	—	—	—	7	—	6	—	189		
Dartford	1	—	—	—	—	—	—	—	1	20	20	10	6	—	—	58	64	7	82	47	24	—	—	22	28	3	2	—	—	—	38	—	4	—	457		
Dover	—	—	—	—	—	—	—	—	1	12	1	3	1	—	—	16	17	3	15	6	25	9	—	17	4	3	7	—	—	—	19	—	3	—	119		
East	3	1	—	—	—	—	—	—	1	13	13	3	1	—	—	62	38	3	94	15	25	9	—	27	5	3	3	—	—	—	42	—	8	—	257		
Elham	—	—	—	—	—	—	—	—	—	3	4	7	4	—	—	33	23	4	70	9	9	2	—	6	13	2	1	—	—	—	1	—	1	—	188		
Hollingbourne	2	—	—	—	—	—	—	—	—	8	16	—	5	—	—	55	28	6	29	46	17	—	7	22	16	2	3	—	—	—	32	—	3	—	360		
Maidstone	3	2	—	—	—	—	—	—	—	9	8	7	12	2	2	42	56	2	79	79	22	—	3	13	12	4	6	—	—	—	4	—	4	—	411		
Malling	—	—	—	—	—	—	—	—	—	2	2	2	3	—	—	4	6	10	31	9	2	—	3	27	12	4	8	—	—	—	1	—	6	—	51		
Rouney Marsh	1	—	—	—	—	—	—	—	—	5	2	5	2	—	—	51	44	4	44	10	21	—	27	3	12	3	—	—	—	—	—	48	—	366			
Sevenoaks	—	—	—	—	—	—	—	—	—	2	14	6	2	1	—	15	17	5	14	3	8	—	3	6	3	1	1	—	—	—	3	—	109				
Sheppey	—	—	—	—	—	—	—	—	—	9	6	9	1	—	—	31	48	3	36	7	7	—	5	6	3	3	1	—	—	—	5	—	219				
Strood	—	—	—	—	—	—	—	—	—	5	11	3	3	—	—	24	23	4	33	8	3	5	3	9	3	3	—	—	—	—	20	—	203				
Swale...	1	—	—	—	—	—	—	—	1	4	8	1	1	—	—	14	9	3	18	2	18	2	3	3	3	—	—	—	—	—	8	—	97				
Tenterden	2	—	—	—	—	—	—	—	—	4	5	5	2	—	—	30	49	4	40	40	11	—	2	12	3	3	8	—	—	—	25	—	253				
Tonbridge	—	—	—	—	—	—	—	—	—	4	5	5	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
TOTALS IN RURAL DISTRICTS	23	4	13	—	—	—	3	1	6	101	150	66	33	389	26	575	547	119	819	207	25	198	187	54	58	25	39	32	2	37	435	47	99	42	—	4,401	
TOTALS IN URBAN DISTRICTS	112	17	37	—	2	4	5	—	35	337	530	287	102	1,310	81	2,024	2,155	299	2,377	678	46	683	791	138	183	69	123	107	4	88	1,162	105	255	140	9	14,377	
TOTALS IN COUNTY ..	140	21	50	—	2	4	8	1	41	438	680	353	135	1,699	107	2,599	2,702	418	3,196	885	71	881	978	192	241	94	162	139	6	125	1,597	152	354	182	9	18,778	
Rural Districts	0.82	0.12	0.38	—	—	—	0.09	0.03	0.18	2.95	4.39	1.93	0.96	11.37	0.76	16.81	15.99	3.48	23.95	6.05	0.73	5.79	5.47	1.58	1.70	0.73	1.14	0.94	0.06	1.08	12.72	1.37	2.89	1.23	—	128.68	
Urban Districts	0.89	0.17	0.40	—	0.02	0.03	0.04	—	0.28	2.68	4.21	2.28	0.81	10.41	0.64	16.08	17.12	2.37	18.88	5.39	0.37	5.42	6.28	1.10	1.45	0.55	0.98	0.85	0.03	0.70	9.23	0.83	2.03	1.11	0.07	114.19	
Administrative County of Kent ..	0.87	0.13	0.31	—	0.01	0.02	0.05	0.01	0.26	2.74	4.25	2.20	0.84	10.61	0.67	16.18	16.88	2.61	19.96	5.53	0.44	5.50	6.11	1.20	1.51	0.59	1.01	0.87	0.04	0.78	9.98	0.95	2.21	1.14	0.06	117.29	

TABLE 7

Showing the allocation of deaths to causes, in children under one year of age.

Causes of Death	Deaths under One Year of Age		
	1938	1955	1956
Whooping Cough	4	2	1
Cerebro-spinal Fever	2	7	2
Diphtheria	1	—	—
Tuberculosis—Respiratory	1	2	—
—Other Forms	9	1	—
Syphilitic Diseases	4	—	—
Influenza	4	—	—
Measles	4	—	—
Acute Poliomyelitis and Polioencephalitis, Acute Infectious Encephalitis	—	—	—
Malignant Neoplasm—all sites	1	1	1
Intracranial Vascular Lesions	—	—	—
Heart Disease, Diseases of Circulatory System ..	—	1	1
Bronchitis	19	15	18
Pneumonia	125	63	57
Other Respiratory Diseases	4	3	3
Ulcer of Stomach or Duodenum	—	—	—
Appendicitis, Diarrhoea, other Digestive Diseases	92	10	9
Nephritis and Nephrcsis	1	1	1
Premature Birth, Congenital malformations, other defined and ill-defined diseases.. ..	593	385	390
Violence	21	20	13
All Other Causes	—	2	15
All Causes	885	513	511

